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ABSTRACT

This report describes a National Workplace Literacy Demonstration project that provided onsite training at participating New Mexico hospitals in job-specific literacy skills necessary for satisfactory job performance. Six courses were offered that integrated language skills with reading, writing, and speaking components--Straight Talk: Communicating in Health Care Settings, The Write Stuff: Memos and Short Reports, Reading and Study Skills, Communication for Supervisors, Effective Presentations, and Effective Performance Appraisals. Each course made use of real workplace documents. Follow-up showed that many participants had been promoted or had their responsibilities increased. One hundred short courses were offered to 811 participants; retention rate was approximately 85 percent. Attachments to the 16-page report include the following: master evaluation summaries for Straight Talk, Write Stuff, Communication for Supervisors, Effective Presentations, and Effective Performance Appraisals; follow-up interview of participants after 3-6 months; executive summary of Straight Talk evaluation; case study of evaluation of communication training effectiveness in the workplace; research summary of Write Stuff pre- and posttests; Write Stuff evaluation of pre- and posttests; Communication for Supervisors follow-up evaluation survey; evaluations of tutoring initiatives at Mimbres Memorial Hospital and Presbyterian Healthcare Services; and a participant-observer's view of a workplace literacy program. (YLB)

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Cuidado de la Salud

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**STEP
AHEAD**

Committed to Improved Health Care Communication

Final Project Report to
U. S. Department of Education
National Workplace Literacy Program
Fiscal Year 1992-93: CFDA #84-198

Project Step Ahead
Submitted by Dr. Stephen A. Bernhardt
Department of English, Box 3E, New Mexico State University, Las Cruces, NM 88003

July 14, 1994

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July 17, 1994

Division of National Programs
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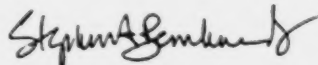
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Dear Program Officers:

Here are two copies of the final evaluation report for **Step Ahead**, the workplace literacy program at New Mexico State University. The report from our outside evaluator, Sally Robinson, is bound with this volume. Our Grants and Contracts Office, which does the SF-269A, will send the financial report under separate cover. Please let me know if you have not received it within a month. We will send copies of this report and our curriculum to the three dissemination centers within a day or two.

Thank you for your help. I have enjoyed working with the Department of Education under two workplace grants. It has been a pleasure to work with people like Nancy Smith-Brooks, Liz Miller, Sarah Newcomb, Melissa Morrill, and Ron Pugsly. If I can be of any service to your work in the Department of Education, please do not hesitate to call on me. I believe in the work you are doing and I congratulate you for doing it so professionally.

Sincerely,



Dr. Stephen A. Bernhardt

**Final Performance Report:
Project Step Ahead
New Mexico State University
Department of English**

**Stephen A. Bernhardt and Paul R. Meyer, Co-Directors
Department of English, Box 3E
NMSU
Las Cruces, NM 88003**

List of Attachments bound with This Report

Master Evaluation Summary for Straight Talk
Master Evaluation Summary for Write Stuff
Master Evaluation Summary for Communication for Supervisors
Master Evaluation Summary for Effective Presentations
Master Evaluation Summary for Effective Performance Appraisals
Follow-up Interview of Straight Talk Participants after 3-6 Months (Ann Wallace)
Straight Talk Evaluation: Executive Summary (Bruce W. Farmer)
A Case Study of Evaluation of Communication Training Effectiveness in the Workplace (Bruce W. Farmer)
Research Summary of Write Stuff Pre and Post Tests (Ann Wallace and Bruce Farmer)
Write Stuff Evaluation of Pre and Post Tests (Ann Wallace and Bruce Farmer)
Communication for Supervisors Follow-up Evaluation Survey (Bruce Farmer)
Step Ahead Evaluation Report on Mimbres Memorial Hospital Tutoring Initiative (Roberta Thulin)
Evaluation of Tutoring Initiative at Presbyterian Healthcare Services, Albuquerque (Rena Paradis)
A First Look Inside a Workplace Literacy Program: A Participant-Observer's View (Diane Pinkey)

U.S. Department of Education: National Workplace Literacy Program
New Mexico State University & New Mexico Hospitals

1. PROGRAM TITLE: FY92 National Workplace Literacy Program
(CFDA 84.198)
2. PROJECT TITLE: Step Ahead: A Partnership for Improved Health
Care Communication
3. AWARD NUMBER: V198A20233
4. PROJECT DIRECTOR: Dr. Stephen A. Bernhardt & Dr. Paul R. Meyer
AWARDEE: Step Ahead: A Partnership for Improved Health Care
ADDRESS: NMSU, Department of English, Box 3E
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TELEPHONE: (505) 646-2027, 646-1418
5. FUNDS BY Federal: FY92 \$302,220
FISCAL YEAR: Non Federal: FY92 \$534,664
Total Funds: \$836,884
Federal Funds - 36% of total funds
6. AWARD PERIOD: May 1, 1992 - November 3, 1993
7. FEDERAL PROJECT OFFICER: Sarah Newcomb
Div. of Adult Education and Literacy
Mary Switzer Bldg. RM 4426
Washington, D.C., 20202
(202) 732-2414
8. OBJECTIVES: To provide on-site training at participating hospitals in
job-specific literacies necessary for satisfactory job performance.
To offer basic literacy instruction to hospital staff who read and
write at marginal levels and in the process to enhance their lives
through access to the world of print and improved language skills.
9. PROCEDURES: Hospital staff at a variety of skill levels will
participate in modular, job-specific classes in literacy and
communication skills. Courses will include study skills; writing
memos, short reports and incident reports; reading and writing
personnel evaluations; oral communication; and supervisor skills.
Staff with basic needs will receive one-on-one tutoring with hospital
or community literacy volunteers and will be encouraged to enroll in
ABE and ESL programs.
10. OUTCOMES/RESULTS/PRODUCTS: Increased literacy and communication
skills; stronger workforce and therefore stronger hospitals; better
use of existing community-based literacy programs through workplace
involvement; a model for dissemination to other healthcare workplaces.
11. EDUCATIONAL LEVEL(S): Adult basic, adult, ESL
12. TARGET POPULATION(S): Undereducated, minorities, limited English
proficient.
13. PLANNED NUMBER OF TRAINEES: 2080
14. PARTNERS: Memorial Medical Center, Presbyterian Hospital of
New Mexico, Lovelace Hospital, Gila Regional Medical Center, Mimbres
Hospital, San Juan Medical Center.

Final Project Performance Report

Step Ahead: A Partnership for Improved Healthcare Communication

Step Ahead was a National Workplace Literacy Demonstration project that brought together the English Department at New Mexico State University, a group of New Mexico hospitals, the New Mexico Coalition for Literacy, and various community-based volunteer literacy organizations to promote enhanced literacy and communication skills among hospital workers. The project ran from May 1992-May 1994. Project co-directors were Paul Meyer and Stephen Bernhardt, both of the NMSU English Department (Box 3e, NMSU, Las Cruces, NM 88003; 505-646-2027).

This project was evaluated by multiple measures: participant comments following completion of the short courses, interviews with participants after a period of 3-6 months, case studies of intact workgroups, structured interviews of tutors and learners in the tutoring initiatives, pre and posttests of learning in short courses, and a qualitative, participant-observer study. Summaries of results and discussions of findings are in the attachments to this overview.

Summary Statements: What We Learned from This Project

- A project like this depends on committed individuals, people willing to give freely of their talents. In this project, committed individuals included: Sylvia Sandoval of Presbyterian Healthcare Services; Diane Pinkey of Santa Fe, a sympathetic project assistant and student of literacy; Susie Sonflieth, Linda Libby, and Leslie Rich of the New Mexico Coalition for Literacy; and Roberta Thulin of the Deming Literacy Volunteers. At NMSU, enthusiastic graduate students like Ann Wallace, Leanne Weir, and Bruce Farmer helped the project immensely. Sally Robinson, our outside evaluator, was very helpful and supportive throughout the project and deserves recognition for outstanding contributions to workplace literacy.
- In spite of the difficulties we encountered, we number many successes in this project. Some participants have new literacy and communication skills; others understand how to tutor or teach courses with solid materials. We see organizations moving in new directions: hospitals growing to recognize the importance of education for their front line staff and community based organizations with new programs in workplace literacy.
- It is difficult to mount a successful project with multiple partners at multiple sites. We were overextended-involved in too many hospitals when we should have concentrated on one or two sites under one or two management structures.
- We mistakenly assumed that volunteer, community-based literacy projects would welcome the chance to extend their efforts into the workplace, with paid training and materials provided. In reality, many literacy groups are underfunded, understaffed, and overworked, unable to undertake new initiatives because they are working as hard as they can to support their current projects in a professional manner.
- Hospitals represent volatile, complex work environments, where literacy and

communications skills training competes for attention with other educational efforts, some mandatory, and where large forces of change make institutionalizing a training program very difficult. A new program is affected by leadership and ownership changes, changes in hospital budget profitability, changes in management philosophy, downsizing and restructuring of work processes, and other factors beyond our control. The timing of our project brought us into direct competition with mandatory training for all employees in Total Quality Management. Though our project would help employees be successful in becoming quality oriented, the links were not there from the beginning and the connections not obvious to all managers. It is no contest when a voluntary educational program competes for participants with mandatory training.

- Like many projects, we learned that recruitment is a constant challenge, to have sufficient numbers enrolled in offerings and able to attend classes with supervisor or manager support. We were too optimistic about levels of participation or even the interest of some small hospitals in participating. Mounting a successful program is particularly difficult in small hospitals, with 80-130 employees, because releasing a significant number of people to take training is extremely difficult logistically. We need to find ways to incorporate training into the work environment and to individualize training through technology and independent learning.
- We learned something of the immensity of the task of gaining institutional buy-in for a program of training for front line employees with an emphasis on literacy and communication skills. At our best site, we are still perhaps only half way toward institutionalizing the program and it will take continued work from committed individuals so the gains we made are not lost.

Comparison of Actual Accomplishments compared to Original Objectives

The following sections highlight *Step Ahead's* comparison of actual accomplishments with original objectives. *Step Ahead's* four main objectives were:

- Improved workforce literacy
- Personal development of workers
- Improved workplace productivity
- General program effectiveness

The original objectives are listed first (in bulleted lists) followed by actual accomplishments.

Improved workforce literacy

- To equip hospital workers with job-specific literacies needed for increased responsibilities and career advancement (reading, writing, oral communication, problem solving, teamwork)
- To create employee-to-employee literacy tutoring or ESL programs to help those employees who read and write at marginal levels

Staff and directors involved in this grant developed and taught a complementary set of

short courses that would equip or enhance hospital personnel with job-specific literacies necessary to provide students with the capabilities to handle increased responsibilities and/or career advancement. Each course integrated language skills, with reading, writing, and speaking components. Each class made use of real workplace documents--policy and procedure manuals, safety datasheets, hospital memos, patient information materials, employee evaluation forms, incident reports--so that what was taught would carry over as much as possible to the job situation. Employees who participated helped shape each course so that they were certain to take useful skills back to their particular jobs.

The following is a list of the courses and a brief description of their contents:

Straight Talk: Communicating in Health Care Settings. This course taught students how to listen and speak effectively, with a focus on active listening, working cooperatively with clients and coworkers to solve problems, and follow through on responsibilities. The class relied heavily on discussion and role playing and was offered as a 16-hour program.

The Write Stuff: Memos and Short Reports. This 16-hour offering was a basic writing course. We worked with students to help them learn how to write quickly and effectively for supervisors and coworkers. The course taught participants how to write short and effective notes and memos for job situations. Participants were encouraged to work on real pieces of writing involved in their jobs.

Reading and Study Skills. This was a course in learning to learn: how to read and study in order to be successful in educational settings. It discussed note taking, effective textbook reading and skimming strategies, and paper-writing. The course used health care related materials and was intended for employees who wanted help with additional preparation for the GED or help preparing for a community college education, but were unsure of their skills.

Communication for Supervisors. This was also a 16-hour course which taught how to supervise other workers in the hospitals. It was intended to help front-line staff make the transition to a supervisory position. The emphasis was on reading, writing, and oral communication skills necessary to become an effective supervisor.

Effective Presentations. This 8-hour course provided useful information to hospital staff about how to speak before a group. The focus for the course was the process of organizing and presenting information.

Effective Performance Appraisals. This course was intended for anyone who was required to evaluate the performance of others, or might need to do so in the future. It stressed shared goal setting, using specific objectives, delivering useful feedback, and making the process an on-going communication activity rather than a hurried, once-a-year task.

Materials for all these courses--student workbooks and teacher's guides--are available through the ERIC Clearinghouse on Adult Education.

In response to needs that were identified as the project was in progress, we also developed a short course that focused specifically on listening skills, a GED preparation class, and short courses in conversational/medical Spanish for speakers of English.

In addition to the **Step Ahead** courses that were offered to hospital staff, an initiative was developed with the cooperation of the New Mexico Coalition for Literacy that created employee-to-employee literacy tutoring or ESL programs to help those employees who read and write at marginal levels. For this strand of our program, we used hospital and community volunteers to tutor hospital workers who had low-level reading and writing skills. The instruction was personalized and focused on reading, writing, speaking, math, ABE, ESL, and pre-GED instruction, depending upon the needs of the employees. We provided employees with the opportunity to participate in one-on-one literacy tutoring within the hospitals or anonymously off-site on their own time. We worked with participants to help them reach their goals and take advantage of resources within their communities, including programs at local community colleges.

Personal development of workers

- To help employees reach individual educational and career goals
- To increase employees' self-esteem and confidence in their abilities

Overall, we found that if we could enhance employees' confidence in their abilities through these short courses, they would strive to meet their career goals. We learned this through both direct instruction and through class evaluations.

Follow-up interviews of employees who attended the Straight Talk course also provided feedback from participants (see attachments). Many of these individuals stated that they had been promoted and/or their responsibilities had increased since they attended the course. They attributed many of these changes to the skills they learned in the class and had been able to use in their jobs. The courses helped them gain more confidence in themselves which in turn created more opportunities for advancement.

Improved workplace productivity

- To teach hospital employees how to improve commonly used hospital documents and patient information materials
- To help supervisory staff better understand the literacy demands placed on their workers

As discussed earlier, each class made use of real workplace documents--policy and procedure manuals, safety datasheets, hospital memos, patient information materials, employee evaluation forms, incident reports--so that what was taught would carry over as much as possible to the job situation. The Write Stuff course particularly met this objective because the participants were encouraged to work on writing from each of his or her jobs. For example, if students were required to write memos or short reports they would first think about the audience and purpose before drafting. Students developed an understanding for the process involved in their own writing and how they could use

this process to improve.

To help supervisory staff better understand the literacy demands placed upon their workers, we allotted time during the Communication for Supervisors and Effective Performance Appraisal courses to discuss the literacy demands placed upon their staff and the need for staff to acquire literacy levels commensurate with their job responsibilities. We accomplished this through a component within each course that addressed how to motivate employees and, more specifically, how to motivate through allowing educational opportunities and providing helpful and effective feedback.

General program effectiveness

- To develop formal procedures and measures for evaluating the effects of workplace literacy programs on employee skills and hospital productivity
- To create a culture within each hospital that fosters full literacy for all workers

Measuring program effectiveness throughout hospital departments is a difficult task. Several methods, however, were employed by *Step Ahead* staff that provided useful results for future endeavors. A research summary was conducted using pre- and post-tests administered during both the writing and oral communication courses. We used pre- and post-tests, analyses of end-of-course evaluations, oral interviews of attendees and their supervisors after a six-month period, and results from an ethnographic/qualitative study of program participants. Attachments to this report provide detailed information on program effectiveness for the several components, with an effect of triangulation among the various measures of program success.

Project Schedule of Accomplishments

The following details site by site accomplishments. Where our actual accomplishments diverge from our initial expectations, we review the reasons and make suggestions for other projects to have better success.

Overall, we met our project goals. We promised to offer 100 short courses of 12-16 hours each to 2,000 employees, basing our estimates on 20 participants per class. We actually offered 100 short courses to 811 participants, reflecting lower actual enrollments than we anticipated. Retention rate in the courses was approximately 85%. We did have to cancel a number of courses for low enrollments, and recruiting remained throughout the project a difficult challenge. We would note that our initial projection in our proposal was for 1,000 participants in short courses, a figure we revised upward in response to issues raised during the negotiation phase. We also offered GED instruction to an additional 15-20 students.

We promised to train and match 60-80 literacy tutors. We enrolled 80 employees in training to become volunteer literacy tutors to other employees in their hospitals and graduated 75 from the 21 hour training courses. We matched everyone who wanted to enter into a tutoring relationship (with perhaps one exception). Many of these relationships (about 30-40%) are continuing; some have resulted in students moving to

other education; some have resulted in new pride and solidarity among hospital staff. Even those who have not continued with tutoring found the experience of training valuable. Having employees who understand basic literacy pays indirect benefits to the hospital through having managers and supervisors who are sensitive to literacy issues. Rena Paradis of the New Mexico Coalition for Literacy helped complete a report on the tutoring initiative at our main site of Presbyterian in Albuquerque; see attachments.

Many employees were involved in ways other than taking classes or tutoring. Approximately 35 were involved in various advisory roles, helping coordinate the project and helping keep us on track. Another 35-40 were given formal "train the trainers" courses to help them develop skills as team teachers in the short courses. These individuals are now confident and talented workplace literacy and communication trainers who continue to work with our materials.

Our project created a wealth of strong, professionally designed materials for workplace training that reflect the state of the art in literacy and communication skills development. These materials are being used in ongoing programs in Presbyterian hospitals, Memorial Medical Center in Las Cruces, and in several hospitals who were not grant partners. They have also influenced the design and implementation of training in other workplace projects: for city workers, for university staff, for national forest personnel, and for workers in high tech industries in the Ft. Collins area.

Presbyterian Healthcare Services-Albuquerque: PHS was by far the most successful site in the project. We taught 40 short courses to 350 employees; 8 additional scheduled courses did not make. We trained 47 tutors and approximately 40 team teachers in the large urban hospitals of Presbyterian Healthcare Services in Albuquerque. PHS continues with its program, having hired one of our staff to keep the program going by offering short courses, supporting its volunteer tutoring program, continuing to train trainers, making the program a part of its regular offerings of education, and continuing to grant released time to employees to attend literacy tutoring and communication skills classes. As of this writing, Presbyterian is planning to offer one short course per month and to continue working with those employees who need tutoring to reach their educational and career goals. They have many trainers now inside their organization who are familiar with our courses and who will continue to team teach the courses and work to further implement the project in their regional medical centers and hospitals around the state.

Our inside champion and coordinator, Sylvia Sandoval, is a success story of the project. She took an early retirement from PHS last December, but continues to help with the project. She has pursued additional training to become a tutor trainer, was appointed to Albuquerque's Hispanic Leadership program, in large part as a result of her involvement with *Step Ahead*. She is working with Albuquerque businesses to set up literacy and language tutoring programs, and was this month appointed to the Board of Directors of the New Mexico Coalition for Literacy. What we truly see here is an effect of this project that is immeasurable: an individual who commits herself to enhancing the literacy of others. Sylvia was herself a high school dropout who returned to night

school to pursue both a GED and a university degree while moving through the ranks at Presbyterian to her position of Personnel Director.

Like our other sites, PHS was the scene of many organizational changes that affected our program. PHS began an incentive program for downsizing its workforce, reorganized many of its functions, including education and human resources, moved people associated with the project from one area to another, began new required training initiatives in quality and customer service, closed or shifted the functions of unprofitable operations, and went through major changes in its top management. We feel that under the circumstances, in a volatile industry characterized by change, we did well with the program and have a continuing commitment from PHS leadership to help workers develop literacy and communication skills. For its efforts, the New Mexico Coalition for Literacy awarded PHS its President's Award for outstanding efforts to enhance workplace literacy. Strong, supportive relationships among people who work for literacy are a program legacy.

Lovelace-Albuquerque and Las Cruces: Lovelace began strong in the project but we were unable to sustain the momentum throughout the project. We taught a total of 17 short courses to some 140 employees. Additionally, we trained 19 employees as literacy tutors and matched them with learners from Lovelace. During the project, Lovelace opened a new clinic in Las Cruces and we conducted short courses for them. We continue to talk with Lovelace-Las Cruces about other literacy and communication skills training. They are likely to continue with this training using our materials in the future.

Lovelace proved to be a highly volatile, unstable environment for this project. We were unable to use flyers or other more aggressive means of recruiting, and so our offerings tended to be lost among other educational programs (and there were many). Additionally, the project coordinator proved to be very busy with her many duties, and there was some passing around of responsibility for the project. Also early in the project, Lovelace sold its food, environmental service, laundry, and other operations to Marriott Corporation, and this took most of our target audience out of Lovelace employ. We never really recovered from this change. Lovelace was also downsizing, restructuring, and going through top management changes. Additionally, because of a system-wide quality initiative, all employees were required to undergo specified training classes, and these mandatory classes seriously interfered with participation in our program, which was voluntary. All of these forces together caused our project to suffer.

Under the circumstances, we achieved reasonable numbers on participation, through far less than we might have if the initial energy and organization had persisted throughout the project period. There were some fine moments at Lovelace: the newly graduated group of literacy tutors receiving recognition, the classes for intact worker groups who gained much from their *Step Ahead* classes and went on to create more harmonious communication within their work groups, and the continuing recognition that basic literacy and communication skills are an appropriate goal of corporate education programs.

Artesia is a small hospital that is a part of the Presbyterian Healthcare Services. We taught *Communication for Supervisors* to 8 employees and *Effective Performance Appraisals* to 12 employees. The coordinators also indicated an interest in Spanish for Healthcare Workers, but we were able to locate a teacher for the course. However, the small size of the hospital and repeated staff changes in the administration of the hospital resulted in constant flux, and we were not able to schedule any other courses. The staff needed time to adjust to their new personnel before we could begin to reschedule. If they are able to maintain their administrative staff, further work in Artesia is possible. We visited with the local literacy volunteer and hospital staff concerning literacy efforts. Although they wanted to participate in the literacy strand of our program, this was not given a priority at the time.

Clovis. *Step Ahead* staff repeatedly contacted the administration at Clovis High Plains Hospital. Scheduling was difficult for the hospital staff and we were unable to get any further commitment this area. Our initial meeting was canceled because of a problem with the administrator leaving the country after embezzling hospital funds. In the face of such upheaval, our project did not become a priority for this site.

Deming. Mimbres Memorial Hospital has one of the most successful employee-to-employee tutoring programs of any site. They now have a good working relationship with their community based volunteer literacy group and have had two tutor training sessions for 13 tutors. A very successful ESL literacy group of 5 women employees met weekly throughout the project, and one-to-one tutoring had an additional 5-10 employees meeting weekly throughout the project. Mimbres is a very small community hospital with only about 80 employees, so these numbers are highly significant. We also taught *Straight Talk* for 8 employees and Spanish for Healthcare Workers for 7.

Mimbres went through many administrative changes during the grant period. We lost our original program champion, the person who understood and valued the program and who signed the partnership agreement. The hospital was sold and the new administrator wasn't familiar with the original commitments made to *Step Ahead*. The new administrator (who only lasted a few months) was too busy with other commitments to pay attention to our program or honor our prior arrangements for employee released time for instruction. This hospital now seems to be enjoying some success under their new management. Future efforts may be more successful now that the hospital is becoming financially stable, but at the critical period for our project, the hospital was close to bankruptcy.

The true success at Mimbres, however, was the literacy tutoring program. The Deming Literacy Program was active in the community. The director worked well with the *Step Ahead* program and the hospital staff to help develop and coordinate an effective program inside the hospital. See the attached report from the coordinator of the Deming literacy group and our project trainer, Roberta Thulin. Roberta was recognized by the NM Coalition as an outstanding contributor to literacy for her extraordinary efforts with the program.

Espanola. We had initially strong support at Espanola Hospital, with 15 participants in the Communication for Supervisors course and 12 participants in Effective Performance Appraisals. The Administrator in Espanola worked diligently with *Step Ahead* staff. However, changes in the administration of this hospital during the grant period resulted in changes in interest generated in the program, and further attempts to meet with administration or offer courses failed. We experienced problems of communication, were unable to maintain phone contact, and lost our positioning within the organization when the top administrator left. We feel that internal disorganization at the hospital prevented us from having a more successful program.

Farmington: This was our most remote site, over 400 miles one way from Las Cruces, where our project was centered. We made visits and repeated attempts to create a program at Farmington, but could not get anything going. A scheduled class did not make enrollments. We kept experiencing changes in our contact person and never really established someone who understood and would promote the program. We were also unable to enlist the support and cooperation of the local literacy group, who wanted us to provide funds to them for a staff position explicitly to help them with the employee to employee tutoring. This problem pointed up a difficulty in our planning. On the advice of the Director of the Coalition for Literacy, we assumed local projects would be happy to join in with us. In fact, some of the local, community based literacy projects were strapped for resources, underfunded and understaffed, and unable or unwilling to extend their resources toward new initiatives in workplace tutoring. We were further confounded by our failure in Farmington when the local literacy group sought funding from the Coalition for a similar tutoring program with the hospital. Funding was denied since they had had the chance to align with *Step Ahead* but had chosen to resist involvement. We may have been a victim of local politics, poor communication, changing structures within the local literacy program, or other factors. Farmington is testimony to the complexity of creating a coalition of people and organizations to address literacy problems.

Memorial Medical Center. Throughout the grant period, Memorial Medical Center remained a consistent site where we taught all *Step Ahead* courses and a GED class. In all, we were able to offer communication classes to 109 employees. The education staff and department supervisors took an active role and were fully committed to making *Step Ahead* successful. We conducted one tutor training workshop in an effort to establish an on-site, employee-to-employee tutoring program. Confusion existed between *Step Ahead* and the community college's Adult Basic Education program regarding their commitment to the hospital. As a result, our literacy efforts conflicted with those of the college. In the future, a clearer understanding needs to be established in order to provide effective tutoring efforts to hospital personnel. Memorial continues to use our course materials, they have staff members who are now qualified to teach the courses, they have a good relation with the local community college for specialized offerings in medical terminology and Spanish for Healthcare Workers, and they are able to refer employees to the local literacy group.

Lovington. Two courses, Straight Talk and Write Stuff, were offered to a total of 19 employees at Nor-Lea Hospital, which is located approximately 250 miles from Las Cruces. Because Straight Talk was offered two weeks before Christmas, attendance was poor during the last two classes. For future planning efforts, we encourage course scheduling with holidays taken into consideration. The literacy effort was not pursued as rigorously at Nor-Lea Hospital because the coordinators felt that the community college (which was 20 minutes away) had a strong program that encompassed their area.

Ruidoso. Although we made several visits and many telephone calls to initiate courses and literacy efforts at Lincoln County Hospital, and although staff at the hospital showed interest in the program, the hospital administrator was not interested in our program. We did meet with the literacy director for Ruidoso. She was willing to work with our program, but indicated that the hospital administrator believed there were very few literacy problems among her staff.

Silver City. We taught Effective Performance Appraisals to 7 staff members. Spanish for Healthcare Workers was requested by the education officer at Gila Regional and it became a very popular offering, with 45 staff members who attended. They continue to have an interest in future classes. They were not interested in the an employee to employee literacy tutoring initiative because many of their employees had recently been trained as volunteer tutors and were working with local high school students who were at risk of failure.

Socorro. We arranged and taught a Straight Talk class to a group of 12, but had many problems with support from the managers and with attendance. We were unable to get the hospital administrator's support, which is critical in a small hospital like this one.

Springer. Colfax General expressed interest in the *Step Ahead* program. A short description of courses and the literacy tutoring opportunities available were sent to the hospital coordinator. Several follow-up phone calls were made, but Colfax General did not respond, and we were, therefore, unable to offer courses in this area.

Tucumcari. Several phone conversations took place with administration from Dan Trigg Memorial Hospital. However, no follow-up occurred on the part of the hospital for course offerings.

Number and Characteristics of Participants

The table below summarizes participation in Step Ahead short courses:

Hospitals	ST	WS	CS	RS	EP	EPA	SP	TR	GR
Presbyterian									
Albuquerque	93	23	57	2	24	49		23	
Artesia			8			12			
Espanola			15			10			
Lovington	13	6							
Socorro	12								
Gila Regional						7	45		
Lovelace									
Albuquerque	29	4	28	14					35
Las Cruces	16								
Memorial Medical Center	44	4	19		6	36			
Mimbres Memorial	16						7		
Total	215	37	127	16	30	114	52	23	35

ST-Straight Talk; WS-Write Stuff; CS-Communication for Supervisors; RS-Reading & Study Skills; EP-Effective Presentations; EPA-Effective Performance Appraisals; SP-Spanish for Medical Personnel; TR-Train the Trainers; GR-Grammar Workshop

Additionally, we trained 88 literacy tutors and had some 70-80 individuals being tutored at various levels. We offered several GED classes to small enrollments, with 28 total students involved. We helped several organizations conduct Straight Talk classes for an additional 78 people, Effective Presentations classes for 41, and Listening Skills for 47 people. These organizations included the Las Vegas hospital, La Clinica de Familia, and the Professional Secretaries Association.

We did not keep records on participation by minorities, but we comfortably estimate that at least half of our participants were of Hispanic heritage, which simply reflects the ethnic makeup of New Mexico. The Black population of New Mexico is under 2%, and our project participation corresponded to the percentage in the population at large. Our project targeted front line, low wage workers and we reached this population.

Dissemination Activities

Disseminating workplace literacy information is an area where we feel we exceeded our objectives. **Step Ahead** personnel have been active in disseminating information to varied audiences through local, state and regional conferences, community organizations, and New Mexico State University. All reports and materials generated by the project will be made available through ERIC.

The following list details our efforts in disseminating information about workplace literacy through conferences, workshops, and papers:

Presentations

How to Handle Difficult People and Maintain Professionalism.. Professional Secretaries International Video Conference. May 1994.

Establishing Employee-to-Employee Tutoring Programs: Challenges and Opportunities. New Mexico Coalition for Literacy Sixth Annual Meeting. June 1993.

Developing Workplace Literacy Programs. Las Cruces Press Women. May 1993.

Developing a Workplace Literacy Program. New Mexico Coalition for Literacy Fifth Annual Meeting. June 1992.

Understanding and Using the Results from the National Adult Literacy Survey, New Mexico Coalition for Literacy Seventh Annual Meeting. June 1994.

Workshops

Straight Talk. La Clinica de Familia. May 1994.

Making Effective Presentations. Professional Secretaries International. April 1994, February 1994, and November 1993.

Developing Tutors for Step Ahead. New Mexico Coalition for Literacy Annual Tutor Training Workshop. September 1992.

Papers at Professional Meetings

"The National Survey of Adult Literacy: Implications and Applications for Literacy Providers." New Mexico Coalition for Literacy Annual Statewide Meeting, Socorro, July 1994.

"Creating a Culture of Literacy in Healthcare Settings." Southwest Regional Literacy Summit. Dallas, September 1993.

"National Workplace Literacy Regional Programs." Southwest Regional Literacy Summit. Dallas, September 1993.

"A Background to Workplace Literacy." New Mexico Coalition for Literacy Annual Statewide Meeting, Socorro, June 1993.

"Roundtable: Cooperative Endeavors between Business, Industry, and Professional Writing Programs." Conference on College Composition and Communication. San Diego, April 1993.

"Literacy in the Workplace: Challenges and Opportunities." International Reading Association, San Antonio, April 1993.

"Working through Conflict: Tensions in Funded Research" Council for Programs in Scientific and Technical Communication. Boise, October 1992.

"Literacy in the Hospital Context." Conference on College Composition and Communication. Cincinnati, March 1992.

"Workplace Literacy and Program Development." Council for Programs in Scientific and Technical Communication." Cincinnati, October 1991.

"Workplace Literacy in the Hospital Context." New Mexico Coalition for Literacy Statewide Meeting, Santa Fe, NM, June 1991.

In addition, we have published several discussions in the professional literature, others will be made available as technical reports under ERIC, and a book manuscript—a collection of essays on workplace literacy—is currently under consideration at Teachers College Press.

Because of dissemination activities, several outside initiatives have begun. *Step Ahead* staff were requested to make presentations and/or present workshops at several conferences outside the scope of the intended audience for the grant. We reached an several organizations and hundreds of people throughout the state, and we have been able to discuss with them the need for and advantages of improved workplace literacy skills among employees. Several papers discussing evaluation results were also prepared and presented to university groups and at society meetings (Western States Speech Communication Association, Society for Training and Development). Additionally, a thesis is currently being written which discusses evaluative measures and results from *Straight Talk*, our oral communication course, and a PhD dissertation is planned at one project site, a participant/observer study of the program at Presbyterian. All of these initiatives have resulted in an increased awareness of the need for improved communication skills, especially among entry level employees, and the opportunities available for workplace training for several literacy levels.

We have shared our materials with hospital training initiatives at multiple sites in New Mexico and Colorado, and single hospitals in Texas, Virginia, Chicago, Oklahoma, Florida, and Massachusetts. We are unsure how many of these sites actually used our materials. We do know the National Workplace Literacy project in Denver adopted and has been using our materials extensively. Sally Robinson of Fort Collins, our outside evaluator, has also found our materials very well conceived and developed and has modified them for use in her industrial training programs in the Front Range area. So we feel our projects has had a significant effect beyond the hospitals we worked with directly.

Evaluation Activities (See below; see attachments for individual reports)

Changes in Key Personnel

Our project had consistent key personnel on the funded lines in the original budget. However, our success was seriously affected by changes in the personnel in our partner organizations and supporting organizations. We review here these changes and their effects on the project success.

Our project co-director, Dr. Paul Meyer, was caught between his role in this project and a tough tenure decision. The Department and University (rightly so) put serious pressure on Dr. Meyer to publish research in time for his tenure decision and this affected his ability to carry out his anticipated project duties (coordination at Lovelace, coordination with Albuquerque Literacy Program, coordination of research and evaluation plan).

Our coordinator at Lovelace-Albuquerque had many duties associated with her position. As the requirements of that position became more complex, it became necessary for her to delegate responsibilities toward the program to other advisory committee members. Although she met with these individuals it was not always possible for thorough follow-up and this resulted in poor communication among committee members at Lovelace, *Step Ahead* personnel, and literacy volunteers. Additionally, the food, environmental service, laundry and other operations were sold to Marriott Corporation during the grant period. *Step Ahead* staff attempted to meet with personnel from Marriott in an effort to continue offering courses to staff members. However, our Lovelace coordinator was unable to schedule any follow-up meetings.

Artesia General Hospital experienced several administrative changes while we were attempting to offer courses. They hired a new administrator who appointed their education officer as our coordinator. While she was interested in the program and was instrumental in getting two courses to Artesia, she was also a full-time nurse who was going through several administrative changes with nursing staff so she was unable to apply as much effort to *Step Ahead* as she wished.

As mentioned earlier, Mimbres Memorial Hospital in Deming was sold and new administration had difficulty honoring commitments made prior to the sale of the hospital. Although the staff appeared interested in the program and additional courses, the changes that were taking place at the time seriously affected our efforts primarily because of questions of release time and questions of job security for the staff that arise with any major administrative change in an organization.

While the hospital in Espanola was not sold, changes in administrative staff affected the program in much the same way that Deming did. Our enthusiastic supporter, the top administrator, left his post and we lost momentum. New personnel did not share the same level of commitment as the previous administration and communication between hospital staff and *Step Ahead* staff suffered.

Distance played a role in efforts at Nor-Lea Hospital in Lovington. Although we were

able to offer two courses, we believe that the proximity of this hospital to another state hampered our efforts. Nor-Lea focused their educational efforts on programs that came out of Texas. This hospital has since been bought by the Lubbock Methodist Hospital system.

The Albuquerque Literacy Program (ALP) was a key player in our project in Albuquerque because of the size of the hospital workforce there. Unfortunately, the ALP literacy program was over committed and underfunded, with too many new projects and too few staff. Most of their personnel were VISTA volunteers who were assigned projects for only six to twelve months. This caused some confusion about responsibilities and record keeping. Though we didn't know it during planning, there was also friction between the Coalition and ALP that interfered with the project. Many turf issues emerged that detracted from our accomplishments. We learned something of the complexity of mounting a project that attempts to coordinate the activities of volunteer organizations. We were ourselves overextended, with too many hospital sites and we were naive about the level of cooperation we expected from the community based programs.

Evaluation Activities

The following attachments demonstrate the several methods of evaluation that were conducted with their corresponding results.

List of Attachments (Bound with this report):

- Final Evaluative Report from Outside Evaluator (Sally Robinson)
- Master Evaluation Summary for Straight Talk
- Master Evaluation Summary for Write Stuff
- Master Evaluation Summary for Communication for Supervisors
- Master Evaluation Summary for Straight Talk
- Follow-up Interview of Straight Talk Participants after 3-6 Months (Ann Wallace)
- Straight Talk Evaluation: Executive Summary (Bruce W. Farmer)
- A Case Study of Evaluation of Communication Training Effectiveness in the Workplace (Bruce W. Farmer)
- Research Summary of Write Stuff Pre and Post Tests (Ann Wallace and Bruce Farmer)
- Write Stuff Evaluation of Pre and Post Tests (Ann Wallace and Bruce Farmer)
- Step Ahead Evaluation Report on Mimbres Memorial Hospital Tutoring Initiative (Roberta Thulin)
- Evaluation of Tutoring Initiative at Presbyterian Healthcare Services, Albuquerque (Rena Paradis)
- A First Look Inside a Workplace Literacy Program: A Participant-Observer's View (Diane Pinkey)

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**Step Ahead:
A Partnership for Improved Health
Care Communication**

National Workplace Literacy Project

**New Mexico State University
in partnership with
New Mexico Coalition for Literacy
and the
Hospitals of New Mexico**

**Final Evaluative Report
June, 1994**

**Sally K. Robinson, External Evaluator
3016 Parkview Court Fort Collins, CO 80525**

TABLE OF CONTENTS

Executive Summary.....	3
Curriculum Quality	
Project Management	
Key Personnel	
Project Design	
Internal Evaluation Plan	
Summary - Third Evaluative Visit.....	6
Purpose.....	7
Strategies.....	7
Itinerary.....	7
Overview of Post-Project Structured Interviews.....	9
Summary of Interviews	
Summaries of Informal Interviews with Students.....	18
Overview of Staff Feedback from Final Meetings.....	21
Secondary Hospitals.	
Outlying Rural Hospitals	
Internal Evaluation - Short Courses	
Ethnographic Approach to Evaluation	
Dissemination	
Timetable and Budget	
Recommendations for Project Completion.....	25
Recommendations for Project Continuation or Duplication.....	25
Appendix A: Action Item List from Third Evaluative Visit.....	27
Appendix B: Interim Evaluative Report.....	30
Appendix C: Preliminary Evaluative Report.....	41

EXECUTIVE SUMMARY

I have evaluated the **Step Ahead National Workplace Literacy Project** for the past eighteen months as external evaluator. Three on-site visits of approximately four days each were scheduled for the evaluation in July, 1992, February, 1993, and October, 1993. During that time, I visited hospital sites, attended administrative meetings, observed classes, and interviewed project partners, staff and participants in Santa Fe, Albuquerque, Cloudcroft and Las Cruces, New Mexico.

I have found many aspects of the project to be exemplary. Much of the operation of this project merits national attention and replication. Highlights of the project are outlined in this executive summary. Additional details and challenges are included in the body of the report. The preliminary and interim evaluative reports are included in the Appendix.

Curriculum Quality

The most outstanding feature of this project and one that deserves national recognition and use is the **Step Ahead** short course curriculum. This curriculum is thoroughly and thoughtfully developed and extremely well written. The student manuals are packaged in an attractive, easy-to-use format, with interesting, health-care oriented graphics which add vitality and humor to the content. The content is based directly on the skills needed to perform well on the job. It contains creative activities and assignments which relate to real life situations that workers might encounter in a hospital or health care clinic.

The accompanying teacher's manuals are complete and helpful. While giving ample suggestions for providing interactive, self-directed learning activities, they are not so detailed as to curtail individual teacher creativity. **Step Ahead** has developed a set of curricula that covers a variety of topics and skills needed by health care workers to deal with patients, doctors, co-workers, paperwork, management and more.

This is a set of curricula that could be picked up and used at any hospital or health care clinic in the country with little to no instruction from the authors. It is relevant to the entire industry, not just to the hospitals involved in the project. In fact, much of the content would be applicable in other industries as well if customized for that purpose.

Project Management

Dr. Steven Bernhardt, project co-director, is an extremely skilled manager. He has the ability to delegate authority and oversight of the various parts of the project to those who are closest to the delivery of services, while at the

same time remaining in a supervisory and coaching role, requiring staff accountability, and carefully monitoring financial disbursements. His relationship and communication to key players in the project has been consistently excellent.

Dr. Bernhardt has ensured commitment and continuation of the project by including several innovative methods of delivery in the project design: team coaching with a **Step Ahead** trainer matched with a hospital trainer, the use of the New Mexico Coalition for Literacy and local adult literacy programs to provide one-on-one tutoring, a dedicated hospital administrator at Presbyterian Hospital to facilitate the project from inside, and the use of Master's and Ph.D. candidate graduate assistants as staff trainers and evaluation designers. In the post-project structured interviews of project partners, when asked if the partner organizations planned to continue the project past the end of the grant period, *every* respondent answered that they were planning on continuing the project on their own and had a plan in mind to do it.

The communication among most staff and partners remained high throughout the project. Some communication did break down, specifically between the Albuquerque Literacy Program, the **Step Ahead** staff and Lovelace Medical Center; however, those problems were eventually addressed as a team. A weekend staff retreat to outline new communication lines and delineation of job responsibilities, as well as phase down and wrap up activities for the project, ensured an organized and smooth ending to the current grant project.

Key Personnel

The people involved in this project are all top quality. The project director has extensive experience in management, curriculum development and coordinating workplace basic skills programs. The trainers, site coordinators, and helping organizations all have training and experience, and the majority have shown a great deal of commitment to the project. The use of graduate research and teaching assistants ensures high quality trainers and a well-designed evaluation plan. The team also worked well together--a vital component to the smooth operation of any project.

Project Design

The project is designed to reach a maximum number of people. One-on-one tutoring matches in basic literacy are set up for those functioning at the lowest levels. These matches are monitored by professionals in community based organizations and the New Mexico Coalition for Literacy. The **Step Ahead** on-site short courses reach employees operating

from an intermediate level to a high-performing level. These courses are designed and delivered by university project staff.

The majority of the training takes place in one large hospital, Presbyterian Hospital in Albuquerque, where the highest number of employees can be reached. Additional staff are in place to travel to small, outlying, rural hospitals, locations where there is usually a short supply of readily available training, especially for employees at the entry level.

The project trained over 1000 participants during the eighteen months of operation. Changeovers in management of several rural hospitals and one large hospital, Lovelace Medical Center in Albuquerque, as well as in a major one-on-one tutoring provider, Albuquerque Literacy Program, prevented further outreach to learners and attainment of the project's goal of 2080 participants. These types of management and personnel changes are to be expected in any industry, and can be especially prevalent in industries that are undergoing large-scale, national revamping and reorganization as in the health care industry.

The 2080 participant goal was ambitious for an eighteen month program from the outset, and was predicated on class sizes of 20 students. Classes were more often made up of five to ten participants because of the difficulty of letting more than a few health care workers leave from any one area at a time. Again, this is a common problem throughout busy organizations. The program was able to nearly meet its projected numbers for one-on-one tutoring participants (85), even though all of the original hospital partners did not participate. Exact numbers of course and tutoring participants will be included in the **Step Ahead** Final Grant Report.

In light of the obstacles encountered, the project can be considered successful in reaching the large number of participants that it did. There are numerous stories of individual successes by course and tutoring participants who changed their work life or personal life for the better. I have included interviews from two such students in the body of this report.

Internal Evaluation Plan

One of the most difficult elements of designing a thorough National Workplace Literacy Project (NWLP) training program is trying to determine the benefit of the training to the company or organization involved. Partner NWLP organizations as well as the U.S. Department of Education would also like to be able to determine the return on their investment of training dollars. Unfortunately, no formula or step by step process has yet been developed that can give organizations an accurate picture of this much needed data.

The *Step Ahead* grant project made an attempt at developing some new ways to evaluate the long-term benefit of the training. Although the *Step Ahead* plan was very ambitious, and in the end, they did not succeed in gathering all of the data they had wanted, other projects may want to look at their extensive initial evaluation plan and some of the innovative techniques used to gather data (e.g., workplace ethnography, long-term follow up interviews) and consider furthering the research in this area.

It will probably take many attempts by many projects to come up with a usable and meaningful evaluation process to measure long-term employee benefits and cost benefits. This project should be credited for their contribution to the cause.

SUMMARY - THIRD EVALUATIVE VISIT

The *Step Ahead* project was operating at full capacity during the third evaluative visit in October, 1993. This indicated that the New Mexico State University *Step Ahead* staff continued to be dedicated to the successful completion of the project goals and objectives and to providing a positive educational experience to *Step Ahead* participants. Many indications of success on the part of participants were apparent. While some of the targeted hospital sites had not participated as much as originally projected, the project had expanded in other areas and offered more courses than anticipated for those hospitals participating.

Coordination and communication among the many project partners was strong and in some cases had improved over the interim visit. Evaluation plans were well under way and a phase down plan had been developed for ending the current project.

The third evaluative visit included post-project structured interviews with eight project partners, two informal interviews with project participants, observation of two "Straight Talk" class sessions, various informal discussions with the project director, and a two-day feedback and planning meeting with project staff. Summaries of those interviews, indications of challenges and successes and recommendations for meeting identified challenges are included in this report.

This was my final on-site visit as the external evaluator. Originally, the project was to be completed in 1993; however, the co-directors obtained a six-month extension. Nevertheless, the third evaluative visit was scheduled and conducted as planned, and was used to collect and interpret both formative and summative feedback on the project. Evaluative feedback was given to the staff at the two-day feedback and planning meeting scheduled at the end of the visit.

PURPOSE

The purpose of the third visit was to provide feedback to the project staff from an external observer's point of view. This feedback, collected through class observations and staff interviews, was intended to help the staff evaluate their progress in relation to proposed project goals and objectives, timelines, and initially stated staff expectations. It also helped to keep the project focused on the original U.S. Department of Education National Workplace Literacy Project (NWLP) criteria upon which part of this final evaluation is based.

STRATEGIES

The following strategies were used during the evaluator's third visit in order to continue to carry out the purposes of the evaluation as outlined by the National Workplace Literacy Program:

- Conduct post-project structured interviews with **Step Ahead** and hospital staff in Albuquerque and Santa Fe concerning expectations met or unmet, benefits, long-term impact, and continuation of programming past the end of the grant.
- Conduct informal interviews with participants in the short course and one-one-one tutoring programs to obtain feedback concerning impact, challenges and benefits.
- Observe additional classes.
- Meet with NMSU staff in Las Cruces to obtain feedback and input on the overall benefits, difficulties, challenges and impact of the grant program.
- Meet with **Step Ahead** co-directors and internal evaluation staff to obtain evaluation data and discuss progress of internal evaluation as well as phase down activities, transition plans, continuation contingencies, final report and final evaluation plans.

ITINERARY

OCTOBER 26

Off-site, Santa Fe

Phone conference with Steve Bernhardt for input on post-project structured interview questions.

OCTOBER 27

New Mexico Coalition for Literacy , Santa Fe

Met with Diane Pinkie, *Step Ahead* trainer, and Susie Sonflieth, Coalition Executive Director, for post-project structured interview.

Albuquerque Literacy Program (ALP) , Albuquerque

Met with Laura Lee Moore, ALP Interim Program Coordinator, Kelly McMahan, VISTA Training Coordinator, and Deinya Phenix, VISTA Outreach Coordinator (*Step Ahead* tutoring component liaison at Lovelace and Presbyterian sites), for informal interview and input on applicable structured interview questions.

OCTOBER 28

Presbyterian Hospital, Albuquerque

Observed first half of "Straight Talk" training with Diane Pinkey instructing.

Met with Sylvia Sandoval, Presbyterian Hospital Human Resources Manager (on-site *Step Ahead* project coordinator), for post-project structured interview.

Presbyterian Northside Hospital, Albuquerque

Met with Dolores Montoya, Housekeeping Supervisor (*Step Ahead* short course and one on one tutoring component participant), for informal interview.

Presbyterian Kaseman Hospital, Albuquerque

Met with Maria T. Pena, Housekeeping employee (*Step Ahead* one on one tutoring component participant), for informal interview.

OCTOBER 29

Presbyterian Hospital, Albuquerque

Observed second half of "Straight Talk" training with Diane Pinkey instructing.

Lovelace Medical Center, Albuquerque

Met with Judy Tucker, Director of Staff Education and Organizational Development (on-site *Step Ahead* project coordinator) and Mark Rolfson, Staff Educator, for post-project structured interview.

Off-site, Albuquerque - Cloudcroft

Met with Steve Bernhardt, NWLP project co-director , and Ann Watson, *Step Ahead* instructor to discuss proposed internal evaluation plan and

finalize plans for external evaluation and staff feedback and planning sessions.

OCTOBER 30

Off-site, Cloudcroft

Met with *Step Ahead* staff throughout the day to discuss project progress, challenges remaining, and phase down plan for the project.

OCTOBER 31

Off-site, Cloudcroft

Met with *Step Ahead* staff to continue evaluation, feedback and planning activities.

OVERVIEW OF POST-PROJECT STRUCTURED INTERVIEWS

Post-project structured interviews were conducted with key players to ascertain if they felt that the project had been successful in meeting their goals and expectations as documented in the pre-project structured interviews. It also served to remind some key players of commitments they had made to supporting the project throughout and assisting with the continuation of the program after the end of the NWLP project period.

As expected, responses to the interview questions covered a wide range of issues and highlighted many staff, organizational and participant needs. Many of the challenges that had been predicted came to fruition, and in some cases respondents were surprised to see how closely they had 'called' a problem. While there seemed to be a plethora of smaller problems that still had to be resolved, the general feeling was that the project had indeed met most of its goals, especially in the largest hospital. The overall feeling of most respondents was that *Step Ahead* had been a very valuable, dynamic project that had benefited many health care employees and helped to build a feeling of community and mutual support within the various health care settings where it was implemented.

All of the respondents felt that the classes and tutoring situations were of high quality and that they incorporated a comfortable environment that facilitated adult learning. Respondents were pleased with the quality of the short course content, curriculum and training delivery. Commitment to the project's success and continuance remained high.

Several key players expressed that after having been involved with the implementation of the project they realized that eighteen months was not a long enough time to accomplish all the goals they had originally hoped

to accomplish. It was, however, enough time to get a solid start on changing attitudes and perceptions toward on-site basic skills education and setting the stage to recruit many more hard to reach employees who could truly benefit from the program. Most felt that more time was needed for the project to reach its full impact.

Summary of Interviews

Respondents:

1. Susie Sonflieth, Executive Director, New Mexico Coalition for Literacy
2. Diane Pinkey, **Step Ahead** trainer, New Mexico State University
3. Laura Lee Moore, Albuquerque Literacy Program Interim Coordinator
4. Kelly McMahan, Albuquerque Literacy Program VISTA Training Coordinator
5. Deinya Phenix, Albuquerque Literacy Program VISTA Outreach Coordinator
6. Sylvia Sandoval, Presbyterian Hospital Human Resources Manager
7. Judy Tucker, Lovelace Medical Center Director of Staff Education and Organizational Development
8. Mark Rolfson, Lovelace Medical Center Staff Educator

NOTE: The following is an approximate summary of responses to the post-project structured interviews and is not meant to be interpreted as direct or exact quotes from those interviewed.

Question #1 - What is your overall assessment of the success of the project? Do you feel it met its goals? Describe some of its benefits.

1. Although Susie conceded that some of the smaller hospitals were not able to take advantage of all phases of the project because of their smaller size (Socorro), tight scheduling (Espanola), or local politics (Farmington), she was very excited about the good results the project had seen in many of the outlying sights that were able to participate fully. She specifically cited the enhanced community feeling that was built within rural hospitals (Silver City) and the increased positive relationships built between hospitals and the community (Deming, Socorro, Las Cruces) in those small towns where they were able to work with the local literacy agency to implement one on one volunteer tutoring programs. She felt both the hospitals and the communities benefited from increased community involvement in the hospitals.

She felt that this project could make the most difference in these rural, isolated communities where there were so few resources available for adult education. She also felt that within the first year of the project, you

could only scratch the surface and establish ties, and that the project needed more time to fully impact the communities that were participating. She was disappointed that Las Vegas hadn't been able to join the project as they were ready and eager to participate, but couldn't because they weren't included in the initial proposal. As a result of the project, the New Mexico Coalition for Literacy is enhancing its LVA and Laubach training to include small group instruction techniques and hopes to incorporate more small group situations into its set up of community volunteer instructional matches.

2. Diane felt that the project had been very successful for a first year project (in Presbyterian Hospital), but felt that they had only begun to accomplish their goals. She felt that their primary goal, to improve communication skills of health care workers, had been met in many cases. They had reached people. They had established relationships and begun to make people aware of the need to improve communication. However, she felt that they hadn't yet reached everyone they had set out to reach, especially the underserved, low-skill employee. She added that it takes a long time to change behavior within a community (the hospital).

She would like to see the project staff be more flexible with the way they deliver short courses: shorten the courses up, set up modules, provide more opportunities for smaller hospitals to take advantage of the training.

- 3,4,5 Laura Lee, Kelly and Deinya were all new to the project and hadn't worked on it long enough to answer this question.
6. Silvia felt the program had been very successful in accomplishing its goals. She felt the numbers attending both the short courses and the tutoring program (over 40 learners and tutors trained) were good. However, she felt that they didn't reach the numbers they could reach in the future.

As a result of the project, Silvia felt they had employees who had better communication skills and raised self esteem. Several learners went on to continue their study at the local community college. She felt that with more time, they could also develop something solid on the west side of the city.

7. Judy felt that the project goals had only been partially met at Lovelace Medical Center. There were, however, a few students that had very good success stories.
8. Mark felt that the project had taken on a life of its own at the Medical Center which required almost no energy at all to maintain after the initial set up. Individuals initiated contact with the administration and did what they were supposed to do without any help. He felt they had helped a few

people do amazing things with their educations, and that considering the lack of focused effort put on the project, there were some "great little successes going on out there."

Question #2 - Which of your specific expectations were met? Which ones weren't? Why do you think they weren't met?

1. Susie had expected to be able to develop their trainers and they did that. The project gave them the opportunity to start a statewide in-service system for their trainers. They did follow up in-service training at Lovelace, Presbyterian Central, Silver, and Deming and have now incorporated in-services into all trainings where matches have been made. They will also phase in two new trainings for their partners per year: workplace enhancement training and small group/ LIT Start family issues training. These will be available to all trainers, not just workplace trainers.

Susie was also pleased with the information dissemination performed, including a panel discussion at a multi-state literacy conference, and highlighting *Step Ahead* at their annual meeting and in their brochure. She felt it was good to get out information to the other programs in the state and to act as a proving ground to try new things out in rural sites. She felt she had a mandate to help the two thirds of the state that is in rural areas, especially after seeing the results of the recent Department of Education National Adult Literacy Survey.

2. N/A

3,4,5. Sixteen matches were made at Presbyterian Hospital, seventeen individuals dropped. Four matches were made at Lovelace.

6. Silvia was pleased that they had a vice president tutoring. She felt that morale had increased and that individuals felt better about themselves, their families, and their company. The interaction in the short courses was good for groups and all levels of employees signed up: supervisors, nurses, and all different types of employees. Silvia was happy that over 300 employees had participated in the short courses.
7. Judy felt her expectations were only partially met. The matches they had were successful. She was concerned about how to use the additional \$3000 they had pledged to put into the project as they no longer needed the software they were thinking of buying. The software ideas had gone by the wayside because they never got the specific information they needed from Paul in order to order it. The communication on it was poor. They also felt ALP had dropped the ball on setting up tutor/learner matches. They

had 10-12 tutors trained by the Coalition, but received infrequent contact from ALP to coordinate set up of matches.

They had put a blurb in their management newsletter each week for prospective learners to contact ALP for help, but had not heard of any response. Based on that, they felt they didn't have a need and should reconsider the \$3000 obligation. They were willing to honor their obligation if necessary, however, and would be willing to fund the services they used from ALP separately.

In addition, nothing had been done with the classes, mostly because they had started customer service and diversity training in May and that was taking up all of their time.

8. Mark said that many of the people who were originally targeted for training were now working for Marriott. Marriott had said that the employees could still take advantage of the program, but were not marketing it. At one point Diane was supposed to do a bunch of marketing and never did. Mark felt he just let the ball drop and didn't contact Steve or Paul.

Two employees that he knew of took the tutoring and had done well. One got a pesticide license and both were happy with the program.

Question #3 - What were the biggest challenges or obstacles to successfully operating the project? Knowing what you know now, how would you have managed the project differently to avoid those challenges?

1. Susie felt turnover was the biggest challenge. The ALP director had left in September. Nobody left there really knew what was going on with the project. Six VISTA's had all new job descriptions before the director left. The one VISTA who was supposed to coordinate the project for ALP had quit. Now they were not even taking names for new volunteers.

To avoid these challenges next time, Susie would set up the relationship with each local literacy agency more formally and would define specific expectations and fallback plans clearly in case of turnover or problems. She felt the tutors should be brought into the local system and given more support. Tutors need to mix with the local agency and not be left isolated.

Another challenge was that each community was so different and they had to be very flexible according to each community's needs and makeup.

2. Diane also felt that turnover, especially the departure of ALP's key VISTA worker on the project, hurt the program and the recordkeeping. To avoid such problems, she felt making a stronger link between the literacy

programs and *Step Ahead* would help. She felt the literacy curriculum and materials should be linked to the greater goals of the project, that some of the material from short courses should be used in tutoring, and that the staff should continually make every effort to provide a link between the literacy program and the short courses.

Diane also felt that every organization needed to make a commitment to playing the role in the partnership they had agreed to play and sign a written contract to provide those services or provide an acceptable back up plan. Every grant is written thinking that this plan will work, but how do you hold people accountable if they don't do what they say they'll do?

- 3,4,5. Laura Lee, Kelly and Deinya felt that ALP should train the tutors that are going to be working with the project. This time, the Coalition trained them. ALP's role was to match the tutor with a hospital employee and provide tutor support. However, they found it difficult to give support if the tutors weren't theirs. They didn't have the same link with the ALP program as the regular tutors did. They felt ALP should take total responsibility for training the tutors in Albuquerque. *Step Ahead*'s tutor retention in Albuquerque was 40%. ALP's overall tutor retention is 70%. They felt they could do a better job with people who were part of their program. They also felt that expectations weren't clear about what their responsibilities were (e.g., recognition, evaluation, problem solving). They felt there should be definitions of responsibilities and memorandums of agreement written.

They agreed that the changeover of directors and VISTA workers at ALP was a big obstacle. The original VISTA's hadn't trained the new VISTA's at all because there was no overlap between shifts. Also, the turnover at Lovelace Medical Center from the students being Lovelace employees to their being MARRIOTT employees caused problems. Judy Tucker, the original *Step Ahead* partner at Lovelace was no longer directly involved because of the reorganization. Deinya said she tried to get a hold of someone at Lovelace many times and no one returned her calls.

They also felt that the funding was too little to do the project. The cost of tutor support per year is \$100 per match. For 51 matches, it would have cost approximately \$5100 for the first six months. They said they currently had 20 matches or \$2000 in expenses. The total cost of running the program was \$7100, but they had only received \$3000. They felt that next time NMSU should fund a 1/3 to 1/2 time person paid commensurate with staffing at Presbyterian Hospital.

6. Sylvia felt that recruitment was the biggest obstacle. Once the students were in one class, they were fine. Then they felt that everybody should attend. She felt that a lot of that was due to the caliber of instructors in the

program. She felt that Steve had been very supportive with her, the trainers, and John Zlondo, with the train the trainer program. The Advisory Committee had made it an even stronger program even though she thought it would be a challenge. They really supported it. Her ongoing challenge was to get continued support from the managers and from the Advisory Committee at a higher level.

She felt ALP worked out great by the end.

7. Judy felt that they should have marketed the classes and tutoring separately--two separate names and slogans. They also should have gone with management of the tutors by ALP from the beginning. She said she didn't realize how much time it would take and how little time she would have.
8. Mark felt problems could be resolved by getting someone who had the time and energy to run the program at Lovelace.

Question #4 - How much do you think this project will affect the participants and the health care centers over the long term? In what ways?

1. The centers that did participate will have some changes in their attitudes toward education for lower end employees. Employees have a perception change on how much the organization cares about them. There are changes in attitude toward on site education for the long term and in the idea of the hospital as part of the community.
2. If more people participate and supervisors are involved so that everybody buys in, there will be a long term effect. We're talking about a change of behavior. One person can't change communication within their department. Learning is social and you have to have other people buy in to communicate as a group. The oral communication skills are skills that people need - listening and expressing themselves more than anything. It's an ongoing process--lifelong learning. This project has started the ball rolling.

3,4,5 N/A

6. It has produced higher skilled employees, community spirit, higher morale. Employees will be more involved because of the project.
7. Very little as a whole; however, certain individuals have benefited greatly. Lillian has passed a medical terminology course and has been taking typing from her tutor to become a ward secretary--she has a whole new look on life.

8. One lady got a 4% raise from getting a pesticide license in grounds keeping. Another who is working along same path will eventually get her GED.

Question #5 - Will the project activities be incorporated into the ongoing regular training and education plan of the organization after the end of the grant period? How?

1. We will continue to support agencies working with hospitals. We'd like to be able to fold workplace training into regular trainings. We'll make sure we always contact the hospital before tutor training programs are put on. Now we specify the hospital as someone they should identify as a major player.

I want to get feedback from agencies and incorporate that into a clearer mandate for local programs on how to work with us, whether *Step Ahead* continues or not. They will always recruit at hospitals and will understand the relationship with us better. I hope we will be able to work with ALP on follow up of the project.

2. It's possible that activities will be integrated into hospital training. Quality is being promoted now by the organization as a priority. Unless the organization sees communication as a priority, it may just be lost. If they do see it as a priority, they may take these classes as part of their training.

We should combine the provision of follow up classes with evaluation. It would give participants a good opportunity to practice again, use the vocabulary again and realize what they've learned. It would also be really good to do some follow up with our partners. It's time for us to give back some information and support to the supervisors and participants. It's typical for a program to come in, do it's stuff and disappear. We need to go in and share what's been happening and what the accomplishments are. We could also survey them: What would you add? Were your people able to attend? What were the barriers? What could we do differently? It would give us a chance to gain credibility and build relationships. The participants and supervisors are our partners in this, too.

- 3,4,5. We can just take the matches into our program. There's no gearing down involved. The loss of paid work time might mean we'd lose some tutors and students. We could contact each match and let them know they can stay as ALP matches and find the students a new tutor if the tutor quits.
6. We're not going to gear down. We're going to gear up. If it's ending, we need to identify the team trainers that can continue the short courses, identify the tutors that want to be trained, and identify more learners. A portion of my time or someone's will be identified to coordinate it. I'm too in love with the program and it's too hard to give it up. I'm thinking

about retiring, but it would be difficult for me to leave the organization and not think about everything the hospital needs. We need standards for the "Employee of Choice" with certain requirements for every employee to meet in order to receive different levels of recognition. Someone from the hospital has to believe in it and work to make it successful. It's a mixture of needs and resources and requirements. There's so much in there and the project is making the employee realize that it's okay for them to take this course or to need help. The coordinator has to really be an employee advocate. I have every intention of incorporating both sides of the program into Presbyterian. I'd like to make "Straight Talk" mandatory. I'd like to have a follow up session with employees to talk about what they have experienced, what did the course did for them, and for them to share experiences. We could find out if what we taught them worked. If not, find out why.

7. I don't think we'll pursue the training that *Step Ahead* offers before the end of the grant. We'll find out what ALP will supply until the end of the grant and find out the costs for after. We want to build the program up again. Volunteers can work for the community. We can work with the Marriott and integrate the program into our regular training. ALP wants to train the tutors themselves. ALP said they could provide people to pitch it at staff meetings. We won't do anything serious until after the first of the year. ALP needs to have some stability.
8. I would like to talk to ALP to find out how we could better work together to serve people without making them feel like their jobs are in jeopardy. Because of the administrative change to Marriott, folks are a little shell-shocked. We may need to come up with new ways to talk about skill enhancement and assimilate classes more into our overall training program.

Question #6 - Do you plan to be involved if the grant funding is renewed? What role are you committed to playing to support the continuation of this program, if any?

1. Yes. Our commitment is to be a supporting partner again. We anticipate a larger roles because of the targeting of smaller communities. We may even help the classroom component gear down to smaller groups for outlying rural communities.
2. I hope that I will continue to teach classes. I probably will continue to do some research that will be more focused. I'd also be interested in doing work with people in the hospital who are interested in teaching. The long term goal is to institutionalize the project. I'm interested in developing people to be good trainers, to take it beyond the materials and teach problem solving skills.

- 3,4,5. Yes. Depending on the compensation, we can provide tutor training, tutor support, recognition, work with the hospitals to recruit tutors and students, matching, tracking, and evaluation. ALP training will give tutors a personal relationship to ALP. The administrative role here is going to be totally different from what it was. The administration is going to contain stronger management. We're going to fine tune the whole program to where we use our expertise better. We need paid staff time or training money. We need to show some stability.
6. Yes! I can be the coordinator and I'd like at least 10 hours per week of my time devoted exclusively to this project. The 13 hospitals didn't all gel this time. Artesia, Lovington, Socorro and Espanola did a little and that was it. I think the reason why was that they didn't have the in-house support, I didn't have the time to do it. I had no staff. Gena helped for a while and was really good. Then she left. Susie didn't do anything here. NMCL didn't do tutoring. Paul was supposed to do Espanola and didn't. I could do that next time. We could have real examples of how this program works. If I retire, I would like to be hired by the project. I'd be committed to working 30 hours per month. If I could have someone helping me keep good records, it would be great. This time, I don't think *Step Ahead* or I kept very good records. There was confusion from everyone on the difference between the short courses and tutoring component. They thought everyone attending courses was in need of literacy skills. Paul was supposed to talk to the managers about the difference but didn't. He had it down for the wrong date. The NMCL theater was great for recruitment.

7, 8. N/A

SUMMARIES OF INFORMAL INTERVIEWS WITH STUDENTS

Dolores Montoya, Housekeeping Supervisor, Presbyterian Northside Hospital

Dolores Montoya was a one on one tutoring student and a short course participant. Dolores' goals were to become a better supervisor and to get her GED. The thought of taking classes right away was difficult for her, however, because she had been out of school a long time. It had been 25 years since she left school in the 11th grade. So Dolores took tutoring at Presbyterian Hospital and studied for her GED with a tutor. Later she took the Communication for Supervisors class and really liked it. She said that Bruce and John did very well teaching the class and that she would never forget them. She went on to enroll in courses at the Technical Vocational Institute and studied GED prep, typing, and computer lab.

Dolores says that *Step Ahead* helped her get the ball rolling. With her tutor, she wrote in a journal: "I want my GED. And if I want it, I can get it." Now she feels that everything she wants, if she wants it bad enough, and she can do what it takes to get. Now she finds herself encouraging her employees to take *Step Ahead*. She says, "It's there for you. I don't want to keep it to myself; I want to share it with them. If I don't let go of fear, I'll never get anywhere, and it's the same for them."

As a result of her urging, two of Dolores' employees took *Step Ahead* classes. She felt there was good long-term benefit to her department in having her employees take the classes. She felt it was best to have students in class all day because it's easier to concentrate and learn better and students don't forget between classes. Even though it was sometimes difficult to find replacements for her employees, Dolores said this: "If I have to, in order to let someone go to classes, I'll go get on my scrubs and go do their work for them if it means they're going to get something they want - an education. It means that much to me."

Dolores felt the marketing should be changed because a lot of employees thought the class was just for supervisors. They didn't really think it was for them. She thought it could be reworded to emphasize the benefits of the class to both their careers and their responsibilities to their families. She felt it was hard to recruit employees into classes because a lot of them didn't understand what was in the classes and were afraid to ask. She also would like to see an English as a Second Language class offered.

Maria T. Pena, Housekeeping Employee, Presbyterian Kaseman Hospital

Maria Pena was a student in the one on one tutoring component. Maria left Mexico after the 6th grade and started working at the age of 14. She has been out of school for twenty years. Maria started studying with a tutor, Dianna Reines, one year ago. As a result, she has already received her GED. She passed the tests first in Spanish, then took one test at a time in English until she had passed them all. She is currently taking basic college math courses (algebra, geometry, percentages) at Technical Vocational Institute in order to acquire the prerequisites she needs for courses in phlebotomy. Her goal is to get an Associates Degree in Phlebotomy. Her tutor, Dianna, still helps her with her English and assists her with her math studies at TVI.

Maria studies at least one and half hours per day. She has three children; the youngest is three. She wants to show her kids how important it is to be educated. Her oldest is thirteen, and she knows he'll graduate from high school for sure. When he was younger, she couldn't help him with his

homework, and she worried that he would drop out. Now, she can help all her kids in school, especially the younger ones.

Maria has a 100% positive feeling about *Step Ahead* and is very grateful for the opportunity it gave her to improve her life and her children's lives. She had always wanted to go back to school, but she had never had the opportunity before. She liked school when she was little and did well until she quit in the 6th grade to work. Now she really wants to impress upon her kids the importance of education. She tells them, "It's not for me, it's for you and for your family when you grow up." When her kids get in school full time, she'll use her extra time to attend school more. Even her husband supports her in this decision, although he doesn't completely understand it. She says, "I'm working very hard and I feel so much happier now. It's like a dream come true."

Maria has some advice for her fellow employees from Mexico who have trouble with English and trouble with kids in school: "If you have a dream, work for it. Do it. Don't stop. Nothing is free, you have to work for it. For your kids, even if you have a piece of paper or a book, that makes a difference to them to see you working on your education. Also, get involved in school. Don't let the teacher do it all. Even if you don't speak English, try to learn. There are schools everywhere. If you live in this country, you need to know the language. You can talk to your supervisor. I am now on an education committee. I'm able to fight for my rights and say what I think. There are situations where you need to communicate and confront, and now I can do it."

Maria found many benefits of the *Step Ahead* program for the hospital. She says that when housekeepers and groundskeepers are working around the hospital, people often come up to them and ask for things: directions, information, etc. If the employee doesn't know or can't answer in English, it doesn't look good for the hospital. If they can help, the hospital looks better. She always tells her Spanish speaking friends to take classes. She tells them that it's right there for them. She's also happy that she can help people in the Emergency Room who don't speak English. She acts as an interpreter and she knows that helps the hospital. She's glad that she is able to help. That way, the people feel more comfortable coming in. Now, she is acting as a PR person for education. She knows that education is the only key to open doors and that, "Now, anywhere you go to work, they'll ask you for a high school diploma."

OVERVIEW OF STAFF FEEDBACK FROM FINAL MEETINGS (10/30,31)

Secondary Hospitals

Memorial Medical Center had a lot of *Step Ahead* classes. Four hundred out of the 1200 employees there participated. Two more classes were set up for 28 people. The tutoring component wasn't successful because of tight schedules, difficulty getting employee time off and a trainer from Albuquerque. Five tutors took the training. All were matched with students; one match continued. NMCL is working with the community college to do all of their tutor training and wants to integrate hospital people into that training. Memorial will not be included in the next grant proposal, but will continue to offer short courses as a regular part of their hospital training offerings. The in-house program champion left his position mid-grant and the next person was very busy and not as effective in generating enrollments. The project at Memorial was rated a modest success.

Lovelace Medical Center experienced several internal and external challenges concerning the project. Lovelace limited the amount and type of *Step Ahead* course marketing. They also underwent a structural change in administration. The work of lower level employees was contracted out by the hospital to the Marriott. Therefore the original targeted participants were no longer hospital employees. Marriott had no obligation to the grant. There was also a CEO change. In addition, all employees had to go through an in-depth customer service training and couldn't handle additional basic skills training.

There was confusion about what role ALP would play and they ended up not keeping good records of tutoring matches. The VISTA workers at ALP complained that they were given this project on top of an overwhelming amount of other work they were expected to do for ALP. ALP's director left the agency and a new director was not rehired right away. In addition, the three VISTA workers mainly in charge of the project finished their work year and left without training or informing the incoming VISTA's. Both ALP and Lovelace felt there was a lack of commitment and time spent on the part of the other concerning the project. There were also complaints of poor communication and follow up on the part of *Step Ahead* co-director Paul Meyers in coordinating the hospital project, especially concerning some software Paul was supposed to help provide for a learning lab. The software never materialized.

In spite of all these challenges, one tutor training and in service was provided to 17 Lovelace volunteers who were matched with students. It is not known how many continued to work with their matches; however, some significant progress and career changes were reported by students in two of

the matches. Lovelace also hosted a "Straight Talk" class; however, it was very challenging because of severe conflicts within the group. The class resulted in a student initiated pot luck at the end of class. A follow up class was presented to relook at communication, experience additional role plays and do evaluative interviews.

Outlying Rural Hospitals

At Deming's Mimbres Memorial Hospital, the tutoring component was deemed successful. Four tutors and eight learners (10% of staff) participated. NMCL did the tutor trainings. There was a good local coordinator there from the local volunteer literacy agency. Deming won the "Outstanding New Program" award from NMCL. There was a good mix and interaction of tutors and learners between the hospital and the local literacy agency. One learner passed her citizenship test and wants GED and nursing education.

Silver City's Gila Regional Medical Center hosted three Spanish classes for hospital personnel. They weren't interested in tutoring or short courses. They had just done a tutor training for hospital tutors to help high school students.

Ruidoso's Lincoln County Medical Center did not host a successful program. The original in-house coordinator was concerned about the amount of work it would take and then changed positions and departments. Subsequent interest in the program never led to an actual program start up there.

Socorro General Hospital hosted a "Straight Talk" course with disappointing results. Because a supervisor showed up, the other participants were silent about any staff communication problems. *Step Ahead* staff had expected support from the hospital's regional coordinators, but were never able to deal directly the administration. Hospital volunteers, however, did participate in the local literacy agency's program.

Lovington's Nor Lea Hospital and the Artesia General Hospital, both very small hospitals, hosted "Straight Talk", "The Write Stuff", "Communication for Supervisors" and "Performance Appraisals" classes. NMCL said they would schedule a tutor training and orientation session for the community and try to get people from both hospitals involved in the community training.

Farmington's San Juan Regional Medical Center experienced some unfortunate local political maneuvering at the beginning of the project. The hospital, which employs many Navajo entry level workers, was already working with a local literacy agency, Project Read. They turned down participation

in the *Step Ahead* grant funded project and then applied for funding from NMCL for a similar project through San Juan Community College. Their request was rejected by NMCL because they were already a partner in the *Step Ahead* funded project.

Tucumcari's Dan Trigg Memorial Hospital also didn't start a program. Both poor communication and their distant location prevented action and commitment. NMCL had scheduled a tutor training and theater group literacy presentation for late 1993.

Springer's Colfax General Hospital was interested in a small program, but the ball was dropped on the part of both NMSU and NMCL in getting something set up.

Clovis High Plains Hospital had some internal personnel problems when the CEO was accused of stealing money from the hospital and then left. Project planning meetings were canceled by the hospital and interest ended.

Espanola Hospital hosted two short courses and expressed interest in a basic literacy class. However, attempts to set up a literacy program were thwarted by lack of hospital response and an inability of *Step Ahead* staff to attend management meetings. *Step Ahead* staff were only allowed to work with the secretaries, who acted as regional coordinators.

Internal Evaluation - Short Courses

Ann Watson and Paul Meyers did an analysis of pre and post test scores for "The Write Stuff" using a scoring rubric and outside readers on 21 students. The results showed no significant differences in pre and post test scores. Possible explanations for the results: The test wasn't difficult enough to discriminate; students worked harder on pre-test; readers scored longer essays higher, but students were taught to write shorter essays; it was unrealistic to assume a big difference in level in such a short course; tests didn't include format considerations, which were taught in class. Staff members suggested eliminating pre and post tests.

Follow up evaluations were completed on "Straight Talk" at Memorial Medical Center. Bruce Farmer talked to three groups (23 employees) that had taken "Straight Talk" in 1990, 1991, and 1992. He used structured interviews to elicit information on what was remembered from the course, how and if the skills had been used on the job, and if any benefit to the company had been realized. Individual success stories were listed.

Ann Watson also did interviews with ten people at Presbyterian Hospital in Albuquerque who had taken "Straight Talk" one year ago. The report on the findings will be included in the final project report submitted by the

co-directors. This type of follow up evaluation is very important and should be developed and used in more training situations to analyze the return on investment of training dollars.

The four level evaluation on short courses included post course evaluations (completed and reported on), pre and post tests (completed but not compiled at date of this writing), long term follow up interviews (completed and reported on), and cost benefit analysis (not completed). A complete report on the internal evaluation will be included in the *Step Ahead* Final Grant Report.

Ethnographic Approach to Evaluation

The program was also evaluated using an ethnographic approach by Diane Pinkey. Pinkey kept track of her informal conversations, as well as comments and conversations overheard while teaching, to log her subjective feelings for how the program was going. She gathered a lot of data and looked for patterns in comments. Her plan in October was to focus on particular topics and categorize her data. A complete report will be submitted with the *Step Ahead* Final Grant Report.

Dissemination

Several presentations were made at state and national conferences reporting on the activities of the grant. Course materials have been entered on the ERIC, Adult and Vocational Education Curriculum Clearinghouse. *Step Ahead* has also shared their materials at other hospitals and nursing homes. The materials have been adapted for use by the NWLP project at Emily Griffith in Denver, CO. In addition, some parts of the program were duplicated in Las Vegas, New Mexico, a non-partner. The completed dissemination report will be included in the *Step Ahead* Final Grant Report.

Timetable and Budget

The proposed timetable was extended. There was a phase out period with reduced staff from January to June, 1994. There were adequate budgeted funds left to fund the extension.

NOTE: By June, 1994, the budget had been expended as planned.

RECOMMENDATIONS FOR PROJECT COMPLETION

- Susie Sonflieth and the new ALP program coordinator need to schedule a time to sit down and discuss what needs to be done to provide support, follow up, evaluation and continuity to the current and closed tutor/student matches at Lovelace and Memorial and to rebuild relationships and communication with the *Step Ahead* partners at those sites. This may include the following: follow up meetings with supervisors and participants to inform them of the program's current status, progress and plans for the future; giving participants a chance to give feedback on the project by way of evaluation forms, surveys or group input; and/or letters or phone calls to those involved announcing the end of the original project and possibilities for continued participation through ALP or the next grant. Contact names and numbers should be given to all participants so they don't feel abandoned by "the program of the month."
- Combine program follow up classes with an evaluative/feedback process. Follow up courses would give participants a chance to realize what they'd learned and applied as well as to practice new skills and vocabulary again. It would also be a chance to gather feedback on the program, renew relationships and give information and support to participants. Let the supervisors know what has happened with the program and what the plans are to continue or end it. Share program accomplishments while gathering useful information such as barriers to participation and benefits observed on the job. .

RECOMMENDATIONS FOR PROJECT CONTINUATION OR DUPLICATION

- Make each partners' responsibilities very clear. Have job descriptions written and agreed upon up front and review roles at a general partners' meeting. Ask each partner to sign a business agreement with *Step Ahead* and set up a back up contingency for each partner if he/she is unable to fulfill the commitment (for example: that partner would not abandon their role without notifying *Step Ahead* staff and helping to facilitate another partner to take over their role).
- Clearly define the hierarchy of accountability. Have New Mexico Coalition for Literacy (NMCL) act as coordinators and consultants for all training, local literacy agency support, tutor support, and literacy tutoring evaluation state-wide, including Albuquerque. This would lend stability and an assurance of maintenance and follow up to the literacy component. Local literacy programs would be under their direction and would need to work with them to supplant or supplement NMCL training with local in-service training and support. They would also be accountable to one

agency for record keeping and indications of tutor support. Fund record keeping and tutor support time spent by ALP.

ALP has a strong training component at the current time; however, it is run by a volunteer. They are currently in a transition stage with no permanent director. When they do get a director, that person will have definite funding for only one year. All six VISTA volunteer positions will be lost within a year and a half. ALP does not appear to have the stability at this time to play a major administrative role in a new project. Although the current staff seem sincere in their desire to do a good job, and the agency could really use the grant funding, using NMCL training and administrative expertise seems like a much safer way to go.

- Spend time strengthening the link between the literacy component and the *Step Ahead* short course component. Share materials or training with literacy partners and tutors so they will feel more a part of the overall project. Include trainers in *Step Ahead* classes. Let tutors use the *Step Ahead* materials with their learners.
- Make sure each site has an inside person paid to recruit, advocate, coordinate, etc. Get a commitment from each hospital to let a *Step Ahead* person attend and present at management meetings. Hire one hospital staff person with designated time to travel to and coordinate programs at remote, outlying hospitals.
- Schedule staff retreats at several mid-points to go over details, challenges and resolution and compile accountability, responsibility and 'to do' lists.

Appendix A: Action Item List

Step Ahead ACTION ITEM LIST

(Collected during third evaluative visit and submitted to staff 11/93)

Before Cloudcroft retreat:

NMCL said they would provide evaluative follow up and closure with all local literacy programs and would help ALP with follow up if they needed help.

ALP said they would call all current and closed tutor/student matches to inform them of their support services, the winding down of the initial *Step Ahead* project, and their opportunities for continued involvement. If students have lost their tutors, or vice-versa, they will find them a new match.

Lovelace said they would call ALP and Marriott to see if they can rejuvenate the program.

At Cloudcroft retreat:

Leanne will contact tutors and students at Memorial and let them know what's happening and will try to find someone to coordinate matches from inside. She will submit a summary report of the tutoring component to Susie. Leanne will also get summary reports together for Deming and Silver City.

Susie will try to get Memorial integrated into the Community College trainings.

Sylvia said she would approach the Presbyterian Hospital students who dropped out and find out why.

Follow up for ALP: Susie will be responsible for follow up on all matches run through ALP. The major NMSU players will put together a list of suggested evaluation questions and deliver it to Susie by Nov. 15. Susie will meet with ALP to finalize the list. Susie will have final responsibility to hire someone (Rena or Leslie) to do the interviews, consolidate the statistics, write a summary report and submit it back to all major players. This activity will be funded through NMCL contracted money.

Susie will also call all local literacy organizations and get numbers on hospital involvement in local agency tutor training courses and matches.

NMCL will have the responsibility of consolidating all data and evaluative information for the tutoring component for the entire *Step Ahead* project.

Paul will talk to Judy to suggest she use the \$3000 promised the project to negotiate ongoing services with ALP.

Paul will pull together data on "Straight Talk" pre/post tests and generate a report to submit to Steve.

Ann will pull together all the Level 1 evaluation data for "Straight Talk" within a month.

Ann will continue long term post interviews at Presbyterian Hospital to consider how to evaluate effects of communication training in health care settings.

Diane will do follow up courses for "Straight Talk" which will include refresher material, student feedback and evaluation information and possible new material.

Bruce will do follow up on the "Communication for Supervisors" course, compile data and write up a post questionnaire report to submit to Steve.

Appendix B: Interim Evaluative Report

Step Ahead: A Partnership for Improved Health Care Communication

National Workplace Literacy Project

**New Mexico State University
in partnership with
New Mexico Coalition for Literacy
and the
Hospitals of New Mexico**

**Interim External Evaluation Report
Operations Phase
March, 1993**

**Submitted by: Sally K. Robinson
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EXECUTIVE SUMMARY

The *Step Ahead* project is progressing according to plan. There are numerous indications of success with the project well under way and in nearly full operation. As with any project of this size, there are the inherent challenges; however, the right people are working on those challenges and striving to resolve any difficulties. The training has been well received in both Lovelace Medical Center and Presbyterian Hospital, tutoring matches have been established, and several outlying hospitals have begun programming.

The interim visit by the external evaluator included informal interviews and discussions with twelve project staff people, observations in two short courses, review of current curriculum, evaluation records and public relations materials, and attendance at a *Step Ahead* hospital advisory board meeting. Indications of success, mid-point challenges and recommendations for meeting identified challenges are included in this report.

PURPOSE

The purpose of the interim visit is to provide formative evaluative feedback to the project staff from an external observer's point of view. This feedback, collected through class observations and staff interviews, is intended to help the staff evaluate their progress in relation to proposed project goals and objectives, timelines, and initially stated staff expectations. It also helps to keep the project focused on the original U.S. Department of Education National Workplace Literacy Project (NWLP) criteria upon which part of the final evaluation will be based.

STRATEGIES FOR INTERIM VISIT

The following strategies were used in the interim visit in order to continue to carry out the purposes of the external evaluation:

- Meet with project co-directors and project staff in two hospital sites and two support service sites in order to obtain mid-project feedback on the successes, challenges and changes

happening during the ongoing implementation and operation of the project.

- Observe group instruction to obtain input on how the classes are going and how hospital participants are perceiving the quality and value of the training.
- Compare project proposal, evaluation plan and timeline against implementation and accomplishments.
- Review current curriculum and course evaluations.
- Plan strategies for final evaluation with project co-directors.

ITINERARY - INTERIM VISIT

FEBRUARY 3, 1993

Off site, Albuquerque

Preliminary discussions with Steve Bernhardt (NWLP co-director) and Ann Watson (trainer).

FEBRUARY 4

Lovelace Medical Center, Albuquerque

Met with Judy Tucker (Director of Management Education and Organizational Development) for informal interview.

Off site, Albuquerque

Met with Liz Garcia, Wendy Lovell, Larry Garcia (Program director and VISTA volunteers for Albuquerque Literacy Program) for informal interview.

Albuquerque Literacy Program, Albuquerque

Reviewed current program literature and intake records, etc.

Presbyterian Hospital, Albuquerque

Observed first session of "Effective Performance Appraisals" taught by Ann Watson and Gena Jones.

Off-site, Albuquerque

Met with Sylvia Sandoval (Presbyterian Personnel Manager) and project staff for informal interviews/discussion.

FEBRUARY 5

Presbyterian Hospital, Albuquerque

Met with *Step Ahead* advisory board (hospital staff) and project staff for informal interviews/discussion.

Observed final portion of "The Write Stuff" taught by Ann Watson and Diane Pinkey.

New Mexico Coalition for Literacy, Santa Fe

Met with Susie Sonflieth (Coalition Executive Director), Michelle Jaschke (Resource Developer), Leslie Rich (trainer), Steve Bernhardt and Paul Meyer (NWLP project co-director) for informal interviews.

FEBRUARY 6, 7

Off Site, Santa Fe

Various follow up discussions with NWLP project co-directors to discuss progress/operations of project, internal evaluation plan implementation and strategies for external evaluation for remainder of project, especially logistics for final evaluative visit.

FINDINGS

Indications of Success

Overall, the project is an extremely successful endeavor. All partners interviewed continue to be committed to playing their roles as outlined in the project proposal and as indicated in the initial structured interviews by the external evaluator. The following is a list of specific indications of an ongoing successful project:

- The communication among project partners remains high.
- Delivery of classes is on or ahead of schedule. Forty-three out of 112 proposed courses have been delivered with another

thirteen scheduled through the beginning of April. The start up time needed by the project before classes could be delivered was very minimal.

- Two components of the internal evaluation are currently being implemented or developed. All group short courses have been evaluated by both the participants and the trainers. In addition, structured interviews of former participants are being developed to measure the impact of courses over time on Memorial Medical Center participants. Some data will be collected in the form of a follow-up survey of participants, co-workers and supervisors.
- Participant evaluations of the courses delivered so far have been consistently high, with trainers receiving mostly 'excellent' or 'good' ratings. Trainers have expressed satisfaction with facilities, project support, etc. Course evaluation forms were well designed.
- Hospital project coordinators at both Lovelace and Presbyterian Hospitals are planning on doing presentations with NMSU project staff to disseminate information about the project.
- *Step Ahead* courses have become an accepted part of regular hospital offerings at both Lovelace and Presbyterian, without any apparent stigma. Project staff at both hospitals have observed some dramatic changes in individual participants.
- There is evidence of strong involvement by Steve Bernhardt in supporting and giving feedback to trainers, attending meetings, and troubleshooting problems. Steve is also collaborating with Presbyterian Leadership Development director, John Zondlo, to develop skilled hospital staff trainers for both *Step Ahead* and other hospital training programs. Paul Meyer continues to be involved as a trainer and course developer.
- Presbyterian Hospital has an active, functional Board of Advisors. Several aspects of the project are being carried out by its members. The board has come up with some innovative PR devices, including buttons, banners, canvas bags, and a cafeteria information day, to encourage workers to participate in training.
- Diane Pinkey is doing a Ph.D. research level ethnography of the *Step Ahead* Project which includes observations, conversations,

attendance at meetings, etc. She remains available to troubleshoot operational problems for the project and will provide feedback and data to project staff for formative and summative evaluation. Her work at the hospitals provides cohesion for the project and a constant NMSU involvement at the sites.

- Recommended New Mexico Coalition for Literacy in-service training for one-on-one tutors has been delivered. The Coalition staff is also conducting ongoing outreach efforts in the outlying hospitals.
- Programming has begun in at least five outlying hospitals with three planning to start soon.

Challenges and Obstacles at Mid-Point

In any project of this size with so many people working together, there will be areas of operation that are more difficult to facilitate. This has to be expected. Several of the challenges listed below were anticipated by project staff in the preliminary visit. Others were unexpected.

- Judy Tucker expressed disappointment at the low enrollment in Lovelace *Step Ahead* programming, especially in the tutoring component. She felt there had not been enough involvement on the part of the Albuquerque Literacy Program in maintaining that part of the programming. Another possible factor impacting low enrollment might be the low-profile marketing being done at Lovelace. Judy also said she was still waiting for software promised to the hospital by the project staff for the IBM Learning Center.
- The VISTA workers from Albuquerque Literacy Program expressed frustration at being over committed, with the hospitals accounting for only two of the nineteen core programs they are serving. They also expressed concern that because of the temporary nature of VISTA positions, VISTA workers were supposed to be focusing on coordinating the start up of projects only, not ongoing operations.
- Lovelace will be contracting out the Dietary, Housekeeping and Grounds Maintenance departments to the Marriot Hotel. It's not

known if these employees will be allowed to attend *Step Ahead* classes on work time after the changeover.

- Both hospitals are experiencing a budget crunch and there is reluctance on the part of work unit supervisors to release employees during work time for classes. A Presbyterian Hospital advisory board member stated that it was hard to let hourly employees off work because they have specific functions to fulfill at specific times of the day. These functions can't be conveniently covered by other workers or part time contract employees. Another possible factor impacting the reluctance to let workers go is that *Step Ahead* programming is competing with other hospital training programs for employees' time.

- The evaluation may not be carried out as planned. It's unclear what is happening with records of progress for tutoring matches. Pre and post tests or writing samples from short courses have been saved, but again it was unclear who will collect and consolidate this information. Memorial Medical Center has not been as involved with the project as anticipated, and follow up interviews as well as some cost benefit analysis was proposed for that site.

In the four level evaluation described by Bruce Farmer ('like', 'learn', 'last', and 'line'), much work has been done on the 'like' (participants' feelings about the training) and 'last' (impact of training on participants work) components. However, the 'learn' (participants' skills progress) and 'line' (how training affected the bottom line of the hospitals) components of the evaluation have not as yet been fully developed.

- All of the outlying hospitals have not initiated programming.

Timetable and Budget

The project is on time according to its projected timetable. NMSU will not have expended the entire NWLP budget by the end of the project period. The extra funding will allow them to extend the project beyond the standard project period.

Review of Curriculum and Observation of Classes

The most current curriculum being offered is of equally high quality as the initial curriculum. All of the instructor and student manuals for the project are extremely well written, giving the instructors plenty of opportunity to provide interactive, self-directed learning for the participants. The information in the manuals is up-to-date and useful and is written in an interesting and readable manner. The graphics keep it fun.

The external evaluator observed half of an 'Effective Performance Appraisals' class and the tail end of a 'Write Stuff' class. The 'Effective Performance Appraisals' class had a good mix of teacher lecturette, large group discussion, individual work, paired work and small group study. The participants had plenty of time to express their opinions and expertise on the subject within small groups. The instructors kept the pace of the class moving along well and demonstrated good skills in managing group dynamics and 'thinking on their feet'. The project director was ready and willing to give input and training suggestions. The participants appeared to receive the instruction very positively and kept up a high level of energy and involvement in the topic. In all, it seemed to be a very useful and enjoyable class. The 'Write Stuff' class was too near the end for the evaluator to provide feedback on.

RECOMMENDATIONS

Taking into account the challenges observed during the interim visit as well as the many strengths and indications of success of the project, the external evaluator offers the following recommendations for resolving difficult areas:

- Rebuild involvement in the tutoring program at Lovelace. Take an inventory of unmatched trained tutors and interested learners and work with Albuquerque Literacy Program staff to get them started. Diane's troubleshooting time could be used well here.
- Facilitate a meeting to set up a mutually beneficial partnership between ALP and Lovelace to maintain the tutoring program past the end of the grant period. ALP

would have to demonstrate their reliability to Lovelace and Lovelace may need to contribute some funding to ALP for a part time staff person. Paul said he would help with this.

- Check into creative marketing at Lovelace, perhaps some communication sessions with managers and supervisors explaining the benefits of sending employees to grant funded *Step Ahead* training. Again, possibly Diane.
- Get the promised software to Lovelace for their IBM Learning Center. Leslie (and Paul) said they would do this.
- Paul and Bruce need to work together to ensure the successful completion of the internal evaluation. Inventory what records are being kept on tutoring numbers, names, attendance and progress and decide how that data will be collected and consolidated for the final report. Create a plan to analyze results from pre and post tests or writing samples from group instruction. Implement the plan for follow-up interviews and surveys at Memorial Medical Center and various other sites. Check into the feasibility of doing the 'line' level of evaluation (cost benefit analysis) during this grant period.
- Work together to set up a mutually beneficial relationship between ALP and Presbyterian Hospital. ALP can be a good adult literacy tutoring provider and Sylvia is good at communicating the hospital's specific needs. There is a lot of potential here for a contractual service agreement that will meet both Presbyterian's basic education needs and ALP's need for ongoing part-time staff funding. A pay-for-services agreement would also generate much needed credibility and PR for ALP in seeking other corporate contracts or contributions. Steve had some good ideas on this. It would be well worth Liz's time to put some serious study into creating such an arrangement.

STRATEGIES FOR FINAL EVALUATION

The following strategies will be used during the evaluator's final visit in order to complete the external evaluation and fulfill the purposes of the evaluation as outlined by the NWLP:

- Conduct post project structured interviews with *Step Ahead* and hospital staff in Albuquerque and Santa Fe concerning expectations met or unmet, benefits, long-term impact, continuation of programming past the end of the grant, etc.
- Meet with NMSU staff in Las Cruces to obtain feedback and input on the overall benefits, difficulties, changes and impact of the grant program.
- Discuss wrap up activities, transition plans, continuation contingencies, final report and final evaluation plans with staff.
- Conduct a final comparison of goals, objectives, timetable, budget, and evaluation plan outlined in NWLP proposal with actual *Step Ahead* accomplishments.

Appendix C: Preliminary Evaluative Report

Step Ahead: A Partnership for Improved Health Care Communication

National Workplace Literacy Project

New Mexico State University
in partnership with
New Mexico Coalition for Literacy
and the
Hospitals of New Mexico

Preliminary External Evaluation Report
Set Up and Planning Phases
August, 1992

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EXECUTIVE SUMMARY

The *Step Ahead* project is a well thought out program using innovative methods that promote state-wide cooperation of adult education and literacy programs. The design of the project positions it for success and ongoing implementation after the end of the grant period. The preliminary visit by the external evaluator included conducting structured interviews with nine project staff people to ascertain their goals, expectations, and commitments to the project. Summaries and conclusions made from those interviews are contained in this report. In addition, the evaluator reviewed the project's proposal, evaluation plan, timetable and currently developed curriculum. Feedback on those factors is provided here as well as an overall listing of recommendations for meeting identified challenges.

PURPOSE

The purposes of this external evaluation are twofold. The first purpose, according to Thomas Sticht (*Evaluating National Workplace Literacy Programs*, 1991) is to allow the Department of Education to "place a value on the program in providing services and in demonstrating innovative and effective practices." The outside evaluator's job in this case is to help the Department of Education monitor how well the program is furthering one or more of the purposes of the National Workplace Literacy Program (NWLP).

The project was funded based on the proposal's successfully meeting the criteria of the NWLP as outlined in the US Department of Education proposal guidelines. Therefore, an evaluation of how well the project is meeting its own goals and objectives as set out in the project proposal, and a review of how well those achievements are meeting NWLP criteria as outlined in the proposal guidelines will accomplish this first purpose.

The second purpose is to support the key players in the project and ultimately the project's successful implementation by providing an external perspective on how well the project is going. The external evaluator's responsibilities in this case include pointing out perceived strengths and weakness of the overall quality and effectiveness of the project to project directors and staff, and to

offer feedback and recommendations on possible challenges and improvement opportunities. Getting to know the key players, one on one interviews with project staff and participants, and informal observations of project meetings and activities will help to accomplish this second purpose.

STRATEGIES FOR PRELIMINARY VISIT

The following strategies were used in the preliminary visit in order to begin to carry out the two purposes of the external evaluation:

- Meet with project co-directors and project staff in two hospital sites and two support service sites in order to get to know the key players in the project and to interview them about their goals, expectations and personal and organizational commitments to the project.
- Tour classroom and one on one training sites, and review preliminary planning, communication and recruitment literature.
- Review project proposal, evaluation plan and timeline.
- Review the proposed curriculum.
- Receive input and plan strategies for mid-point evaluation with project co-directors.

ITINERARY - PRELIMINARY VISIT

July 30

Lovelace Medical Center, Albuquerque

Met with Judy Tucker, Director of Management Education and Organizational Development (on-site project coordinator) and Linda Libbey, New Mexico Coalition for Literacy Tutor Trainer for structured interviews and tour of Lovelace training facilities

Off site, Albuquerque

Met with Steve Bernhardt and Paul Meyers, NWLP project co-directors to discuss project plans, achievements and challenges.

July 31

Presbyterian Hospital, Albuquerque

Met with Sylvia Sandoval, Personnel Manager (on-site project coordinator), for structured interview.

Albuquerque Literacy Program, Albuquerque

Met with Liz Garcia, Program Director, and Wendy Lovell, VISTA Volunteer (Step Ahead tutoring component liaison at Lovelace and Presbyterian sites), for structured interview and tour of Albuquerque Literacy Program facilities.

New Mexico Coalition for Literacy, Santa Fe

Met with Susie Sonflieth, Coalition Executive Director, and Michelle Jaschke, Resource Developer for structured interview and tour of New Mexico Coalition for Literacy facilities and resource library.

August 1

Off Site, Santa Fe

Met with NWLP project co-directors to discuss proposed internal evaluation plan, design external evaluation plan for remainder of project and complete structured interview.

FINDINGS

Shared Goals, Expectations and Commitments

Structured interviews were conducted with project staff in order to ascertain if key players had similar goals and expectations for the project and to clarify individual commitments to carrying out the goals and objectives of the project. Feedback from all participating partners in these area at the initial stages of a grant project can prevent unnecessary and unproductive misunderstandings later on.

Everyone interviewed was very well informed on the vision as well as the details of the project. This finding indicates that there was a great deal of up front communication and education about the project on the part of the co-directors and grant partners.

Everyone seemed to be operating 'from the same page' on the concept of workplace literacy and the goals and expectations for the project.

Expectations for benefits or improvements from the project were consistently very positive with a 'whole person' approach to what constituted success for the individual and the organization. Those expectations included increased skill levels, job performance and opportunities for advancement as well as building morale, self esteem, self confidence, parenting skills and motivation to enroll in higher education. Organizations hoped to improve communication and relationships both within hospital departments and between the hospitals, the literacy support agencies, and the community.

Some people mentioned expectations of indirect benefits such as a decrease in turnover, accident rates, worker's compensation claims and sick days. It should be noted that at this time there is no plan in place to track that type of indicator and that those measures are not exclusively influenced by workplace skills training. However, an individual's expectation for improvement in an area does not necessarily indicate an expectation to track that improvement.

In addition, it didn't seem to be clear to individuals whose responsibility it was to collect certain type of anecdotal evidence of success (e.g. who would talk to supervisors or other hospital staff about the effects of workplace skills training on a learner's job performance).

Many felt that logistics would be a challenge, especially in recordkeeping and establishing effective channels of communication. Getting and keeping support from managers and supervisors was a concern, especially in the areas of obtaining paid release time and getting supervisor support in letting employees take time away from the job. Those interviewed felt this support was extremely important to the success of the project. Some were concerned about 'turf' issues between hospitals and local literacy support programs.

Plans for what classes and tutoring sessions should look and feel like were consistently of high quality and incorporated creating a comfortable environment that facilitated adult learning. There

were some differences in opinion about the ideal size and number of tutors that should be involved in a tutoring match, but in general it was felt that groups of three to five learners with one to two tutors would work well for small groups and that some one on one tutoring was also needed. Flexibility is the key in establishing tutor matches and project staff will most likely design the learning environment that best fits the particular learners' and tutors' needs.

Commitment to the project's success and continuance was very high. All parties were committed to taking an active role in the project's implementation, including planning, logistics and support. Most also had plans on how they would be involved in continuing to implement the project after the NWLP funding had ended.

Summary of Interviews

Respondents:

1. Judy Tucker, Lovelace Medical Center, Director of Management Education and Organizational Development
2. Linda Libbey, New Mexico Coalition for Literacy, Tutor Trainer
3. Sylvia Sandoval, Presbyterian Hospital, Personnel Manager
4. Liz Garcia , Albuquerque Literacy Program, Director
5. Wendy Lovell , Albuquerque Literacy Program, VISTA volunteer, *Step Ahead* Tutoring Liaison
6. Susie Sonflieth, New Mexico Coalition for Literacy, Executive Director
7. Michelle Jaschke , New Mexico Coalition for Literacy, Resource Developer
8. Steve Bernhardt, New Mexico State University, National Workplace Literacy Project Co-director
9. Paul Meyer, New Mexico State University, National Workplace Literacy Project Co-director

NOTE: The following is a summary of the expressed goals, expectations and commitments of individuals and is not meant to be interpreted as direct or exact quotes from those interviewed.

Question #1 - What does "workplace literacy" mean to you?

1. The ability of workers to do the job effectively and communicate effectively with co-workers and clients.
2. Agreed!
3. Enhancing employee's skills in many areas.
4. The basic skills curriculum (reading, writing, math, English, communication) is geared and specialized using workplace materials. 'On site' doesn't necessarily constitute a workplace literacy program. It must support both employer and employee goals.
5. Agreed, and it must improve the environment at the workplace by allowing people to reach their limits. That way people (in entry level jobs) won't feel like they're divided from the others.
6. The ability to function in the workplace and attain career ladder possibilities.
7. A bridge of the skills gap between employee and employer.
8. The communication skills that hospital workers need to be effective in their jobs.
9. Ditto!

Question #2 - What do you feel the goal of the Step Ahead program is?

1. To improve communication, decision making and self esteem of the learners, tutors and teachers. It's a total environmental effort, not just for the learner. The hospital has a commitment to the community as a whole. This program will help hospital employees help their families and become better citizens.

2. To improve the communication skills of participants through first-line supervisors (including the tutors). Self-esteem affects everyone you deal with. Often, the front line employees who deal with patients the most are the least well educated in communication skills.
3. To enhance employee communication skills and self esteem. To reach out to employees and enhance their resources. In two to three years, to see several participants enrolled in Junior Colleges and to facilitate their having better promotional opportunities. To expand Presbyterian Hospital's community involvement by eventually inviting the community to participate in the program.
4. To increase the opportunities for advancement of all employees and to help them excel in their current jobs. To build morale, teamwork and self esteem.
5. To increase pride in the workplace and to promote a sense of caring and responsibility among employees. To give people a chance to better their education.
6. To enhance language and communication skills in workplace settings. To improve self esteem and productivity in employees. The bottom line is better health care.
7. To improve health care communication.
8. To enhance worker communication skills and build stronger organizations within hospitals. To promote collaboration between hospitals and community education and literacy resources.
9. To increase workers' opportunities for advancement. To institutionalize the effort by building programs within participating hospitals that do not require federal funds.

Question #3 - a. What expectations do you have for the program? What benefits or performance improvements do you anticipate? b. Who do you expect to participate? How many? c. What would be a good indicator of success of the program for you?

1.
 - a. Changed behavior on the part of individuals - self mastery, self confidence. The ability to communicate better. Decreased turnover. It's not realistic to expect everyone to read at an 8th grade level. Lovelace is not expecting to measure the cost benefit for now.
 - b. Anyone who wants to take classes can, front line through supervisors. Entry level employees (e.g. Dietary, Groundskeepers, Housekeeping, Maintenance) and non-readers can take tutoring. Classes will accept employees with 4th grade reading level and above. One on one tutors will accept employees with 8th grade reading level and below.
 - c. Anecdotal evidence will be the indicator for success. Lovelace also expects to hear about negatives in employee's lives (e.g. difficult changes in family dynamics as a result of classes, people who can't move up even though they're qualified now).
2.
 - a. Non-learning disabled learners are expected to advance two years in reading level in one year of tutoring. Others may increase their self-esteem and confidence level without necessarily changing their reading level. That situation would also be considered successful. We expect to see a decrease in number of sick days, disciplinary action, friction between employees, accidents, and workmen's compensation claims.
 - b. Anyone can take it up to first line supervisors.
 - c. The number of ongoing tutoring relationships will be a good indicator of success. If it's working, you'll have learners signing up all the time. We'll also have anecdotal information from supervisors (e.g. supervisors will receive fewer complaints about front-line employee communication with patients.)
3.
 - a. Morale will increase. (as measured by an employee survey). There will be an increase in the level of communication within the departments and the amount of interaction between managers and employees. (Already several administrators want to be tutors.) Learners expect not to be 'labeled'.
 - b. All levels will sign up, including entry level workers, nurses, supervisors and managers. At least 300 employees

- will participate with at least 150 of these coming from entry level positions.
- c. 80% of the students who participate will have met their goals. Projected number of participants will be met.
- 4.
 - a. Work performance will increase. Workers will have a higher ability to take tests for advancement. Job 'attitude' of workers toward work, as seen by supervisors, will improve. (Sometimes workers show anger and poor behavior on the job because of low skill levels.) There will be better attendance and participation on the job. Quality of family time for employees will improve because they will be able to deal with family stresses and responsibilities better and be able to help children with their homework. This project will be the model for how to develop a good workplace learning program - what to do at what stages. You could package and sell it.
 - c. A good measure of success would be that by the end of the grant 30 active tutors will have worked with 150 adults who would have moved into group or classroom situations. Many would have moved into the community college situation. Other indicators of success would be included in the student portfolios, which will include self assessments and tutor assessments. The results of the site visit evaluations will evaluate the program as a whole.
 - 5.
 - a. People will really see a need to encourage education.
 - 6.
 - a. We will see an improved community feeling. Workers will be happier and more productive. There will be better interaction between departments and better relations between hospitals and the community. We'll have the ability to disseminate information about setting up good workplace literacy programs to other states.
 - 7.
 - a. We expect to be able to develop Coalition trainers' and tutors' ability to deal with workforce issues.
 - 8.
 - a. We expect to exceed the proposed number of employees participating in the project as well as the amount of matching resources directed toward front line personnel specific to this project. There will be a good working relationship between community literacy programs and

major workplaces. The project will help shape the goals of state programs such as the New Mexico Coalition for Literacy regarding workplace literacy and will help to get those programs extended into the workplace.

9. a. We expect to experience moderate success in reaching goals.

Question #4 - What challenges or problems do you anticipate?

1. Logistics will be a challenge - matching tutors, marketing, keeping energy in the program, keeping it fresh and satisfying for the participants.
2. Scheduling of tutors. Tutor matches maintaining a consistent tutoring time. Confidentiality - the tutor is not free to tell the supervisor about the learner and shouldn't call the learner at home or church.
3. Support from the managers is needed. Now, they want to have employees take classes on their own time. Some are worried about losing dependable employees if their skills are raised. Also, it will be a challenge to work with an advisory committee to operate the program. The difficulty will be in the logistics - making sure everyone does what they have committed to doing.
4. Supervisors may not support letting learners off work. By not encouraging participation, they will be sabotaging the program. Communication will have to be excellent at all levels. Information should be given directly to participants whenever possible.
5. Other staff members may resent the time taken off work by tutors and learners.
6. Smaller sites - A couple of hospitals want the program but don't have any support services (volunteer tutor programs) locally. The challenge will be to use the grant funding period as a jump start to organizing volunteer programs in those areas. In smaller communities, personalities become

more important. There may be some problems with the idea of outsiders coming in to run programs on their 'turf'. Smaller hospitals with approximately 25 beds may not have enough employees to make a regular Coalition training possible, so training can be opened up to the community or the Coalition will run the training with fewer people. Space for training, tutoring and classes may be a problem.

If release time is not given to the employees to take the training, they may not come. Also, learners may experience problems communicating with supervisors after they learn new skills. There may be turf issues between the hospitals and the local literacy support agencies. Hospitals are not used to having a lot of community involvement in their training programs.

7. This program circumvents a lot of possible problems by calling it 'job training'. Also, local literacy programs will be better at reporting statistics because they are working with NMSU.
8. Recordkeeping may be a problem. There will be complex logistics to organize, and several sites are remote. It will be difficult to get very busy hospital workers to commit to the amount of recordkeeping necessary to track enrollment, attendance, progress, etc. It is also difficult for the project co-directors to control the amount of hours they put toward the project. It should be about ten hours per week but often works out to be a lot more.
9. The biggest challenge will be the logistics involved in managing the different sites. Smaller sites will probably have less going on, but communication and cooperation will still be a challenge. Communication across groups and keeping everyone informed is a big challenge.

Question #5 - What would you like the classes to look like? (size, methods, atmosphere, interaction, content, etc.)

1. The tutor matches will experience a sense of accomplishment, mutual respect and motivation. The environment in the classes will be enjoyable. They will be learning something

they can use. There will be respect between the teacher and student. There will be a mix of learning and teaching styles. The volunteer tutors will learn a lot and will need coaching. Classes will be kept to less than 20 learners.

2. Half of the small tutoring groups will consist of three to five learners with two tutors helping each group. The other half will be one on one. The environment will be comfortable to the learners, with appropriate temperature and lighting, flip charts, boards, tape recorders and computers. Some tutoring students will need a room with few distractions while others will learn better with lots of visual stimulation. The tutoring methods used will be a mixture of LVA, Laubach and whole language (and math). Teaching and learning styles must match. Everything will be job related (because discussion will naturally relate to things they have in common - i.e. their employer and jobs) and include the 'whole person'.
3. Classes will take place at the University of Phoenix and in hospital offices. The instructors will be good. Classes will be participative. Tutoring sessions will be one on one or small groups. Tutors will be committed and see a vision for the learner.
4. Tutoring sessions should facilitate learners to recognize their potential for themselves, to see new options and new perspectives. There should be mutual learning, for example, the learners become tutors and the tutors become trainers. There should be a lot of support between tutor and student. One tutor should work with five learners.
5. There would be five in a tutoring group with good attendance. Others would be encouraged to join the group because there would be no stigmatism. It would be a safe environment and focus on functional objectives.
6. Paid release time. Environment conducive to learning. Prepared teachers who understand the hospital environment. Hospital oriented examples and materials. Food at the classes. A cross section of participants. Tutoring in any private place. Tutoring should be in small groups, one tutor to two or three learners. Content should be flexible, include

ESL when appropriate, and incorporate Laubach phonics with LVA methods.

8. Classes should consist of 15 to 20 students each and provide a relaxed, friendly learning atmosphere that fosters mutual respect. Well trained teachers will help classes progress smoothly, making it through all of the proposed content. The learning should be active and easily applied to the job. Tutoring sessions should be a mix of individual and small groups. The context should be workplace oriented to facilitate job advancement. The literacy volunteers should be fully cooperative and embrace the opportunity to move the program into the community.
9. Agreed, and class participation should cut across hospital hierarchy.

Question #6 - a. What role are you committed to playing in support of the success of this program? b. After the end of the grant period?

1. a. Provide logistical support throughout the grant period: marketing, registration, classrooms, food, materials, whatever it takes.
b. Facilitate the program coming 'in house' after the grant period and doing the logistics for the program indefinitely. Lovelace will eventually train their own teachers and tutor trainers. All trainers will be employees or contracted out. Many will be LVA certifiable. Lovelace is committed to working on Workforce 2000 issues and has a commitment to the success of the community as a whole.
2. a. Provide one 20 hour training and follow up to Lovelace volunteers. The Coalition will provide additional trainings if more are needed. The tutors are committed to six months of volunteer tutoring, twice a week for two to four contact hours per week plus preparation time.
3. a. Be a leader and a liaison for the program. 'Just do it.'
b. Presbyterian Hospital will continue classes after the grant period with teachers trained through the project's team teaching process.

4. a. Provide support to tutors through planning, student/tutor evaluations, internal support group formation (with newsletter and group activities), monthly reports on hours spent and progress achieved, and inservice trainings for tutors. Keep a data base of information for the project and put together a plan for evaluation at Lovelace Medical Center. Oversee the two ALP VISTA volunteers coordinating on-site activities.
b. ALP support of the program will continue after the end of the grant period. They will figure out a way to find funding.
5. a. Provide support to the tutors and teach them how to use the resources available to them. Collect tutor reports. Perform intakes and screening. Make tutor matches. Help to plan and implement the program.
6. a. Help with the planning to set up the project for success. Interface with businesses and promote literacy as an avenue for economic development (e.g., through press releases). The New Mexico Coalition for Literacy has committed a significant amount of resources, including travel and training, to the project.
b. Local Coalition programs are committed to continuing to support the project after the end of the grant period. The New Mexico Coalition for Literacy will continue to support local programs and provide ongoing tutor training after the end of the grant period. However, the hospitals will need to pay for the materials.
8. & 9. a. The project co-directors are committed to institutionalizing the project, with hospitals taking and using the materials developed through the grant. They would like this to be the last grant funded NMSU workplace literacy project. They are committed to seeing more people trained and more learners taught as well as to giving graduate students experience in working on workplace literacy projects. They will disseminate what was learned nationally and make the project materials available to other projects. They will continue to encourage hospitals to put more resources toward developing skills in employees who are outside the professional and nursing staffs.

b. After the grant ends, they will be available for consulting if programs need help in keeping the project going. They would be able to provide workshops, hospital communication consulting, and assistance with establishing workplace programs in other hospitals.

Planning and Set Up Process

The planning for the *Step Ahead* project has been exemplary. The inclusion of the New Mexico Coalition for Literacy positions the project well for ongoing implementation. The team teaching approach assures a ready supply of well trained and experienced classroom instructors and allows hospital staff to train as instructors during the grant period. The use of already established literacy support groups provides a permanent local ownership for program implementation and continued support.

All project staff interviewed were well versed on all aspects of the program and committed to its success. Judy Tucker, the site coordinator at Lovelace Medical Center had set up an advisory committee consisting of employees from all departments to provide feedback and planning on the project. They were readying their new training facilities and looking into purchasing computer learning resources for the program. Sylvia Sandoval, the site coordinator at Presbyterian Hospital had set up a similar advisory committee and obtained an in-house program sponsor for the project. The committee had already established its purpose and mission, roles and expectations, recruitment strategies, and indicators for success for the program. Both administrators should be congratulated for taking a team approach to developing their programs.

Project Proposal, Evaluation Plan and Timetable

The *Step Ahead* project proposal presents a well thought out plan for implementation. The plan is thorough in its effort to provide for all aspects of implementing a vital, ongoing workplace literacy program. It includes plans for ongoing tutor training, ongoing group instructor training, building a base of managerial support and 'advisory boards', and ongoing one on one and group instruction. The extent of accomplishment of most of the goals

and objectives in the proposal's "Plan of Operation" can only be evaluated after the program has been operating for a longer period of time.

The project's evaluation plan is very thorough. In addition to measuring the usual indicators of number of participants, attendance, learners' progress, etcetera, the program will attempt to measure the extent to which participants apply what they've learned to the job and what type of continued education or job advancement they've pursued. This will be accomplished by post- program observations, interviews and worker self reports at Memorial Medical Center in Las Cruces. The design and development of evaluative interviews and surveys is not yet complete. If this type of 'transfer of training' evaluation is proven to be effective and quantifiable, it will be a very valuable addition to the knowledge base within the field of workplace literacy.

The program is also employing a graduate student, Bruce Farmer, who is exploring other approaches to the project evaluation. His 'four-element scheme', based on Del Gaizo's Happiness Index and Kirkpatrick's Evaluation Model, includes evaluating *Like* (how participants liked the program), *Learn* (what they learned), *Last* (how participants use skills taught on the job), and *Line* (how the training affected the bottom line of the organization). This approach seems to make a lot of sense, is simple and appears comprehensive. It will be interesting to see how the different types of evaluations fit together.

The project is on time according to its projected timetable.

Preliminary Review of Curriculum

Much of the curriculum for *Step Ahead* is already well developed. Some is still in the draft stage. A preliminary review of the "The Write Stuff", "Reading and Study Skills" and "Straight Talk" showed that that curriculum is well designed with creative ideas for instruction, activities and assignments. It is presented in an attractive format with interesting, hospital oriented graphics. There is a lot of interaction built into the curriculum. The content for each course is based on the skills needed to perform well on the job. All activities and assignments relate to real

situations that workers might encounter on the job. The functional context approach to teaching oral and written communication skills is strong in these materials.

The accompanying teacher's manuals are complete and helpful. While giving adequate suggestions for structuring time and activities to get through the content in the student book, they are not so detailed as to curtail individual creativity. These manuals would work well with the team teaching approach accompanied by individual teacher preparation.

The curriculum will be evaluated again at mid-point in the project when it can be seen in operation in the classroom.

Anticipated Challenges

Communication among so many players in the project will be a challenge. Clear and regular communication will need to be maintained among the co-directors, the site coordinators, the advisory boards, the state Coalition, the local literacy support groups, the trainers, the tutors, other related hospital staff workers and the learners. From the interviewing process, it became apparent that there was some lack of clarity about who would be collecting evaluative anecdotal information from supervisors about learner progress. Several people mentioned that that was something that needed to be done and they were willing to do it. However, speaking to supervisors or any other staff person about a learner's progress can be a sensitive situation and should be handled with care by one clearly designated person at each site.

There also seemed to be some vagueness among those interviewed on what follow up evaluative information would be collected. Accident rates, attendance, turnover, improved attitude, and fewer complaints to supervisors were all mentioned as indicators to measure success of the project. The project proposal states that most follow up information will be collected at Memorial Medical Center in Las Cruces only and not all of the indicators mentioned will be taken into account.

Logistics will be a big challenge for this project. Keeping records on the number of classes and participants, number of tutors trained,

number and length of matches operating, learner progress, etc. is a monumental task but essential to a clear accounting of program achievements and a valid evaluation at the end of the grant period. With so many different groups working in cooperation on the project, it would be easy for each group to assume someone else was doing the recordkeeping. One person or group should be designated to keep records at each site.

Another challenge will come in getting started at some of the remote sites. The programs at larger hospitals have taken and will continue to take a lot of time to get set up and operating smoothly. Smaller, 25-bed hospitals at remote sites will be more of a challenge to get started because of the commuting involved for meetings, lack of tutor trainers in the area, possible lack of a local literacy support agency, lack of enough workers at the hospitals to make large enough tutoring groups, and time and 'turf' issues. Working by phone, cooperating with any literacy or adult education groups or individuals already working within the community, and establishing relationships with support people within the hospitals will be essential to having these hospitals participate in the project.

The Coalition for Literacy is basing their tutor training on the LVA and Laubach methods of instruction used to train tutors in regular adult education and adult literacy programs. There is no evidence that this type of tutoring method does or doesn't work well in workplace situations. Although the tutor training does contain suggestions for incorporating workplace based materials and activities into the daily lesson plans, those tutors with little experience in using functional context may choose to stick with the standard books and methods. One of the main criteria of the National Workplace Literacy Program is to deliver instruction that is based on the skills needed to perform well on the job using job related materials and activities that can be directly applied to the job. Therefore, a challenge will be to monitor the type of instruction delivered in the one on one or small group matches and support those tutors in using workplace based materials and activities in their instruction.

RECOMMENDATIONS

- Clarify roles and responsibilities related to collecting anecdotal information from supervisors and other hospital staff workers with all related project staff: co-directors, site coordinators, advisory boards, community literacy support groups, tutor trainers, group instructors and tutors.
- Clarify the extent, type and location of follow up evaluative data to be collected with all partners.
- Delineate responsibility and get commitments from project staff at each site for regular, ongoing program data collection of numbers, names, attendance, progress, etc. Have one person from NMSU coordinate collection of all data.
- Provide inservice training for all volunteer tutors on incorporating workplace based, functional context materials into their regular LVA or Laubach lesson plans. Allow time for feedback and questions on tutoring methods, special challenges, new learnings, and accomplishments.
- Remain in regular communication with all current project partners and support groups, and establish good communication and support lines at remote sites.

STRATEGIES FOR MID-POINT EVALUATION

The following strategies will be used at the mid-point evaluation in order to continue to carry out the purposes of the external evaluation:

- Evaluate curriculum and the effectiveness of small group and one on one instruction in light of actual delivery
- Interview teachers, tutors and students for feedback on program (best practices, problems, suggestions)
- Observe program selected instruction

- Meet with additional project staff as needed to obtain feedback
- Compare program progress and timeline with proposed objectives and NWLP criteria
- Meet with project co-directors to finalize strategies for final external evaluation.

Below is a summary of the **Straight Talk** class, the percent of students who completed the course, and their evaluations of the course.

Condensed Summary Report on Straight Talk Class

Class: Straight Talk
Location: Presbyterian Hospitals, Lovelace, Memorial Medical Center, Nor-Lea Hospital
Percent of Students who completed course: 87%

Course Evaluation

	5 Excellent	4 Good	3 Average	2 Fair	1 Poor
Instructor's knowledge of subject matter or course material presented	131 (87%)	20 (13%)			
Instructor's presentation of course materials (clear, concise, organized)	122 (81%)	27 (18%)	1 (1%)		
Instructor's ability to answer questions clearly and appropriately	122 (81%)	27 (18%)	2 (1%)		
Instructor's manner (friendly, helpful)	136 (90%)	15 (10%)			
Value of course materials or handouts	92 (62%)	47 (32%)	8 (5%)	1 (1%)	
Relevance of skills learned to your job or work situation	97 (64%)	48 (32%)	4 (3%)	2 (1%)	
Your overall evaluation of this course	116 (78%)	32 (21%)	2 (1%)		

Open Ended Questions and Comments

Each question is followed by the percentage of people taking the course who mentioned in open ended format a specific comment.

1. What did you find most valuable about the course? 149 responses

- Being a better communicator 32%
- How to be a better listener by paraphrasing being empathetic, and using attentive body language 26%
- How to improve communication in situations dealing with conflict, confrontation, of difficult people 20%
- Role plays 13%
- Being open with co-workers 5%
- How to use "I" language (as opposed to saying "you" and putting the other person on the defensive) 4%
- Everything was helpful 4%
- Instructors 3%
- The importance of having patience 3%
- Realizing communication problems are not exclusive to individuals 2%
- Course was mandatory 1%

2. What did you find least valuable about the course? 82 responses

- Nothing. Everything was valuable 53%
- Not all situations were relevant to individual jobs 6%
- Role Plays 4%
- Not enough time 3%
- Individual depts. wanting to "vent" their problems 4%
- Homework - reading 2%
- Book should be sent up differently 2%
- Eight-hour sessions are too difficult for work schedules 2%
- Would like more training on dealing with aggressive people 2%
- Empathy 1%
- Too few co-workers are attending 1%

3. How did you learn about the course? 130 responses

- Supervisor 29%
- Notices withing the hospital 26%
(flyer, bulletin board, poster, newsletter, educ. calendar)
- Co-workers 13%
- Mandatory 12%
- Dept. or staff meetings 7%
- Personnel, Human Resources 6%
- Step Ahead promotions 5%
- Not Applicable 5%

4. Any additional comments or suggestions. 105 responses

- Everyone, including supervisors and managers, should take the course 30%
- Everything was valuable - what I learned will help me in the future 25%
- Good instructors 19%
- Hope there are more courses offered including a Straight Talk follow-up 14%
- Would like more on assertiveness and other communication skills 4%
- Liked role plays 3%
- Needed more time 3%
- Allow the employees the necessary time off to attend classes 3%
- Notices about courses & how to enroll need to be more specific 3%
- Eight-hour block was too long 2%

5. How will you apply what you learned to your job? 82 responses

- Will communicate better with customers, co-workers, and/or at home 48%
- Will listen more carefully to what is being said 15%
- I will practice these skills and use them 12%
- Be more willing to confront difficult communication situations 9%
- Be more empathetic 7%
- Think about a communication situation before I react to it; have more patience 6%
- Not applicable 6%
- Use "I" statements and paraphrasing 2%

Below is a summary of the Write Stuff class, the percent of students who completed the course, and their evaluation of the course.

Condensed Master Summary Report on Write Stuff Class

Class: Write Stuff
Location: MMC, Nor-Lea, Presbyterian,
Percent of Students who completed course: 87%

Course Evaluation

	5 Excellent	4 Good	3 Average	2 Fair	1 Poor
Instructor's knowledge of subject matter or course material presented	26 (93%)	2 (7%)			
Instructor's presentation of course materials (clear, concise, organized)	22 (77%)	6 (21%)			
Instructor's ability to answer questions clearly and appropriately	24 (86%)	4 (14%)			
Instructor's manner (friendly, helpful)	27 (96%)	1 (4%)			
Value of course materials or handouts	20 (71%)	7 (25%)			
Relevance of skills learned to your job or work situation	20 (63%)	11 (34%)	1 (3%)		
Your overall evaluation of this course	22 (79%)	6 (21%)			

Open Ended Questions and Comments

Each question is followed by the percentage of people taking the course who mentioned in open ended format a specific comment.

1. What did you find most valuable about the course? 26 responses

- Processes of organizing and producing thoughts on paper 54%
- Importance of planning 12%
- Benefit of having others review your writing 12%
- Feeling confident about writing skills 8%
- Instructor 8%
- Writing assignments and text 8%
- How to get point across with as few words as possible 4%
- How important it is for memos and other written material to be explanatory and accurate because it is final 4%
- Don't need big words to convey messages 4%
- Sense of what is correct, proper, & effective in business writing 4%

2. What did you find least valuable about the course? 9 responses

- Nothing. Everything was valuable 44%
- Writing time pie chart 11%
- Diagramming 11%
- Idea of reader, subject, audience triangle 11%
- Slow pace 11%
- Not applicable 11%

3. How did you learn about the course? 25 responses

- Flyer 48%
- Miscellaneous Notices (memo, postings, bulletin, literature) 20%
- Supervisor 8%
- Personnel 8%
- Step Ahead promotions 8%
- Not applicable 8%

4. Any additional comments or suggestions. 17 responses

- Good class. I enjoyed it 35%
- Would like more grammar rules 12%
- This class would be helpful to all persons on staff 12%
- Should advertise in an in-house newsletter with a description of course content 6%
- Time slot was difficult - perhaps a Saturday class 6%
- Would like more on charting 6%
- More in minutes, agendas, sentence structure & common mistakes 6%
- Would recommend this class 6%
- Would like to see more of these classes offered to employees 6%
- Goals were stated, but objectives were not 6%

5. How will you apply what you learned to your job? 17 responses

- Will practice and use daily the writing skills I learned 53%
- Be able to write more effective memos and short reports 12%
- Will consider process and organization more 12%

- Make my writing more clearer and more understandable 6%
- Consider audience more 6%
- Although there is little writing on the job, I will use it outside work 6%
- Communicate with co-workers in a clearer manner 6%

Below is a summary of the **Communication for Supervisors and Team Leaders** class, the percent of students who completed the course, and their evaluations of the course.

Condensed Master Summary Report on Communication for Supervisors and Team Leaders Class

Class:	Communication for Team Leaders
Location:	Presbyterian Hospital(s), Lovelace, MMC
Percent of students completed the course:	96%

Course Evaluation:

	5 Excellent	4 Good	3 Average	2 Fair	1 Poor
Instructor's knowledge of subject matter or course material presented	55 (85%)	10 (15%)			
Instructor's presentation of course materials (clear, concise, organized)	52 (80%)	10 (15%)	3 (5%)		
Instructor's ability to answer questions clearly and appropriately	55 (86%)	8 (13%)	1 (2%)		
Instructor's manner (friendly, helpful)	57 (89%)	6 (9%)	1 (2%)		
Value of course materials or handouts	48 (81%)	9 (15%)	2 (3%)		
Relevance of skills learned to your job or work situation	44 (69%)	17 (27%)	2 (3%)	1 (2%)	
Your overall evaluation of this course	49 (78%)	13 (21%)	1 (2%)		

Open Ended Questions and Comments

Each question is followed by the percentage of people taking the course who mentioned in open ended format a specific comment.

1. What did you find most valuable about the course? 64 responses

- How to communicate better with my employees 28%
- Everything 16%
- Interaction with other supervisors 14%
- Writing skills 11%
- Role plays 9%
- Dealing with confrontation & criticism 9%
- Problem solving 8%
- Instructors 5%
- Text 5%
- Evaluation process 3%

2. What did you find least valuable about the course? 41 responses

- Everything was valuable 51%
- Reading and writing 15%
- Disappointment that the panel members did not show 10%
- Moved slowly at times 10%
- Not enough role playing 7%
- Wanted more info on TQM 2%
- Wanted more dynamics 2%
- Basics of supervision 2%

3. How did you learn about the course? 61 responses

- Supervisor/Manager/Director 23%
- Miscellaneous notices (memo, letter, hospital briefs, voice mail) 23%
- Flyer 21%
- Education Depts. in the hospitals 15%
- Step Ahead promotions 8%
- Personnel/Human Resources 7%
- Not applicable 3%

4. Any additional comments or suggestions. 37 responses

- This was a helpful course 38%
- Enjoyed the class size & format 14%
- Good instructor 8%
- Some parts of course dragged 8%
- More people should take this course 5%
- Would like more role plays 5%
- Written and oral skills should be taught apart from this 5%
- Would like more time on problem employees 3%
- Would like more on how to handle our boss 3%
- Too cool in the room 3%
- Monotone vs. Expressiveness presentation needs work 3%
- I would like to sign up for Write Stuff 3%
- Disappointment that panel of supervisors did not take place 3%
- don't use white board for overheads 3%
- Morning class would have been better 3%

5. How will you apply what you learned to your job? 40 responses

- Practice and use these skills daily 58%
- Use the writing skills 15%
- Use these skills for confrontation & criticism 8%
- Will have better listening and paraphrasing skills 8%
- Not applicable 5%
- Problem solving 5%
- Have more patience 3%
- correct behavior, not person 3%
- Involve employees more 3%

Master Summary Report on Step Ahead Class

Class: Effective Presentations
Location: Presbyterian, MMC
Dates: 1/93; 5/93; 7/93; 7/93; 10&11/93
Completion Totals: 8,5; 4,4; 9,7; 7,2; 6,5 = 23/34 = 68%

Course Evaluation

	5	4	3	2	1
	Excellent	Good	Average	Fair	Poor
Instructor's knowledge of subject matter or course material presented	23 (85%)	3 (11%)	1 (4%)		
Instructor's presentation of course materials (clear, concise, organized)	20 (74%)	6 (22%)	1 (4%)		
Instructor's ability to answer questions clearly and appropriately	24 (89%)	2 (7%)	1 (4%)		
Instructor's manner (friendly, helpful)	25 (93%)	2 (7%)			
Value of course materials or handouts	18 (67%)	9 (33%)			
Relevance of skills learned to your job or work situation	21 (78%)	6 (22%)			
Your overall evaluation of this course	24 (89%)	3 (11%)			

Open Ended Questions and Comments

1. What did you find most valuable about the course?

- The booklet, guidance, teacher, interaction, good coaches
- Getting up on your feet
- Prepare myself for future presentations
- The info—not only in the book but also personal experiences of instructors
- Having an outline on which to prepare future presentations
- How to organize a speech
- This was a refreshing class. Gained basic knowledge about presenting material. Feel more comfortable, learned about myself.
- Preparing, exercises, & presentations. The examples of all members are extremely helpful.
- I appreciated that you used a lot of examples. I liked that we were able to hear others' presentations.
- Teaching by instructor, allowed for self-expression and interaction. Personal comfort level was maintained at all times-Instructor made sure everyone had input.
- The tips (outline) on how to make & prepare for presentations.
- It was a working course/application as we went.
- Handbook was/will be useful. Good instructor.
- Help in creating structure of presentation & brainstorming
- Interaction with other people
- Structured outline format, tips for organizing presentation.
- The resource booklet.
- How to put together the presentation, structured outline, actually giving the presentation.
- New ways of presenting, what should be included in a presentation.
- The many hints and tips. The booklet. Having to present and receive immediate feedback.
- The instructor and booklet. Both gave me new ideas about how to present.
- Erased some fears about speaking in front of people.
- The book
- The fact that we actually did a presentation
- Being able to stand in front of a group of people & presenting myself
- The feedback from the audience
- Actually having to put together a presentation and give it in front of an audience

2. What did you find least valuable about the course?

- Blank
- N/A
- Needed more time to attend the classes
- Overheads-we did better without the distraction
- Nothing
- Everything was interesting
- Everything was great
- Nothing
- Everything was good, but probably time Ann spent reading from manual least valuable (minimum)
- I used it all.
- I can't really think of anything.
- Can't think of anything.
- The donuts.
- Blank (4)

- blank
- blank
- nothing, everything valuable
- blank
- I'm not sure there was anything that was not valuable

3. See chart above.

4. How did you learn about the course?

- How to give an effective presentation with good skills
- Dining table notices
- Learn a lot by sharing information with one another
- Through dept flyers
- The Step Ahead Program
- Patti Galliher
- Flyer
- Step Ahead/John Zondlo
- Through handouts sent in inter-office mail. Also Personnel encouraged it.
- Through Education Calendar
- From the John Zondlo newsletter
- Flyer
- Through lab manager (thru *Step Ahead*)
- Leadership update Management Council
- Intra-hospital flyer
- Flyer sent to our office
- Flyers (3).
- Flyer sent to department.
- Flyer from education.
- An info flyer was in my mailbox.
- bulletin on bulletin board
- flyer
- Sylvia Sandoval and Virginia Adams
- Sylvia Sandoval and Cheryl Segura
- reading about it in Leads

5. Any additional comments or suggestions.

- I feel better about myself and speaking in front of others
- I loved it
- Advertise this classes all over the hospital. I learned about it at the cafeteria
- The instructors really complemented each other very well-very knowledgable & professional. Thank you so much!
- It's really a great class
- The course was just great!
- Would have preferred to attend in the mornings. Afternoons were tiring.
- Please have speakers follow the time allowance. Info was extremely useful, but the purpose of *Effective Presentation* purpose was lost.
- Maybe a quick 3-min. presentation required on Thursday to calm the nerves.
- Ann's sharing of personal experiences was helpful (empathetic).
- It might be good to spend some class time actually working on the presentation (30 min.) in pairs or groups so we could ask questions as we develop our presentation.
- Thank you!
- Difficult to leave work to attend, maybe 2 full days instead.
- Leanne is a good teacher. I am glad I took the class.
- Blank (3)

- none
- video taping
- I enjoyed it very much and learned from it, would like to do it again
- Thur, Fri afternoons were not good times to schedule a course
- Might be interesting to give a pre-presentation! And compare the before and after

6. How will you apply what you learned to your job?

- Speak to nursing classes.
- Day-to-day. Also formal presentations.
- Helps me structure my presentation rather than shoot from the hip. I can make a better self evaluation after the presentation & feel/knew where I need help.
- This will help me out greatly for my presentation. Thank you!
- The motivation statement - getting the proper info. to stand out when I interview. Thank you !!
- Practice Practice Practice
- Hopefully every talk will improve
- I'll keep my manual & notes to refer to
- Use in my dept. management responsibilities presenting to staff & in my professional presentations.
- Frequently - I give freq. presentations
- I'm hoping to be better prepared and more comfortable next time I have to make a presentation.
- Good practice.
- With each presentation.
- Incorporate better flowing info, a simple intro and a gracious closing.
- I am involved in orientation and do a lot of working with higher level administration.
- By using techniques learned in class, I hope to become a better presenter.
- Blank (1).

Instructor Evaluation

1. Give your overall evaluation of how well the course went:

- This was the first time this course was taught in the PHS system. We initially only expected to have 5 students and 8 showed up the first day of class. But by the end of class, we only had 5 students. The course went very well with the five remaining students. We were surprised how much time they put into their presentations. The time (2:00-4:00 p.m.) was good because they were not coming right back from lunch so they were attentive.
- The course went very well. Students asked questions and worked hard on their presentations. It would have been a little better if we could have more than four students; however, it was still a very good class.
- I enjoyed this course. Although most of the participants already give presentations associated with their positions, they expressed an interest in learning any additional techniques that would help them. They were a good, energetic group and participated in much interactive discussion. The students were not afraid to try something new. I was impressed by the fact that they behaved like students and not experts who didn't need to be there.
- Giving presentations was part of everyone's job in the class, and it appeared that everyone was learning and enjoying the class. The class not only learned from the book and class discussions, but they also learned from each other. We had good discussions and everyone participated. We were really surprised that only two showed up on the last day because we had thought that the class took them through each phase of the presentation so they would be prepared when it came time to actually do the presentation.

Up until the last day of class, we thought the class was going very well. We started out with seven students but ended up with only three people actually giving presentations. Only two people showed up on the last day, and one other person had already given her presentation because she knew she could not be at class the last day. The two who didn't show up on Thursday did call and say they would not be able to make it. But we were still a little upset because the others did not have an adequate audience for feedback.

Aside from the last day, we felt those who stayed in the class learned how to present better and felt more confident in their abilities as a speaker. We enjoyed teaching the class together and learned from them as well. One of the students, Delia Cervantes, is involved in a professional secretaries organization and has asked Leanne to conduct a mini Effective Presentations workshop for a meeting in November and possibly conduct a longer workshop at a video conference around April.

- This was the first time that I was teaching this class. I was happy to have a co-teacher, Cheryl, working with me. She was enthusiastic about the course and contributed to making the class successful. The course participants were helpful and supportive to each other. They took the class seriously despite the distractions of impending lay-offs and missed meetings in their work areas on this subject of great concern. Several participants came to class looking for ways to do a better job of presenting since their jobs required these skills. I believe that they got some new ideas and experience working in the safety of this small group.
2. **What did you observe or what did students volunteer that made you think the course was effective?**

- Students were not afraid to ask a lot of questions. This was a big help to them as they prepared their presentations. They worked on structuring their presentations and using the outline in the back of the book. They also began working on their presentations early and came to class prepared. Again we were surprised how much time they put into their presentations. Students were very supportive of each other and worked together well as a group.

We had one student in the group who had never given a presentation before. Though all of the presentations were good, her presentation turned out to be the best. The supportiveness of the group really helped. Also, one of the supervisors came to the presentations on Friday. He asked each presenter questions and helped the group realize that they could speak, even when unexpected guests appear. The supervisor was also very supportive of the program.

- Students were not afraid to ask a lot of questions. This was a big help to them as they prepared their presentations. They worked on structuring their presentations and using the outline in the back of the book. Students were very supportive of each other and worked together well as a group.
- They shared experiences, stayed "on track," and asked many questions.
- Many of the students said they wished they could have taken this class before they started presenting. There were so many things that they hadn't thought about, such as clarifying medical terms for their audience and effectively using visual aids. Some also said they thought that everyone in the hospital who presents should be required to take the class because it helped them learn how to present better. We could also tell that they were learning from discussion because all of them (except one) were always writing down what

we were discussing. We left class each day feeling that everyone learned something and felt good about the class (except the last day).

- Feedback that indicated that the course helped included enthusiasm for new ways of looking at presenting, e.g. thinking about audience and purpose, trying to nutshell, and doing a timed presentation. I didn't prepare a presentation this time but, I asked Cheryl to do the one she had prepared in her EP class. She did a nice job, and participants appreciated this part of the course. By the way, I think it's a good addition to the course. Modeling seems to be yet another teaching/learning style that some students prefer.

3. What interfered with the effectiveness of the course?

- The first day we had 8 students and this dropped to 5. One student had given many presentations and really did not need to be there. Another had unexpected commitments she could not break, but expressed an interest if this course is offered again. A third just could not bring himself to get up in front of the group and speak. Except for this, Effective Presentations turned out to be a good course.
- Aside from only four students, nothing interfered. It was a good course.
- Nothing. Rooms were good, refreshments were good, and students (although just after lunch) were attentive.
- As discussed earlier, the low attendance on the last day of class interfered with the effectiveness of the course. They were also upset because only two showed up because they wanted to present and get feedback from as many people as possible. But we stayed the full two hours and discussed each of their presentations in detail with the two who did present.

Although the students didn't feel the class was too long, some said they would have preferred a two-day class instead of a four-day class. They were all very busy at work and said the timing would have worked out better for them, but they also realized that they would not have had much time to prepare a presentation.

- Since this was the first time I was using these materials and presenting the course, I felt that my timing was off somewhat. This course is still new to me. Public presentations are still scary to me. Other than not exactly feeling ownership in the course materials, I did express enthusiasm for the course. Again, Cheryl and Sylvia (who came the last day of the presentations) offered great support.

4. Did the hospital do its part to recruit students, provide an appropriate classroom, provide refreshments, and generally coordinate course delivery?

- The hospital did a good job. We didn't expect a very high enrollment because just the title of the course makes some people feel anxious. We were happy that we continued the course with only 5 students so that they could finish and go out and tell others. As it turned out, 5 was a good number because we just made it through the presentations in the 2 hours we had. If we have higher enrollments in the future, we will need to adjust for the presentations, possibly making them 5-7 minutes instead of 10 minutes. Hospital personnel were supportive and maintained contact with us to make sure we had everything we needed. Gina or Emily both called people who didn't attend a class a certain day and found out why. Refreshments were there each day and the room was comfortable.
- The hospital did a good job. We didn't expect a very high enrollment because just the title of the course makes some people feel anxious. I was happy that the staff at PHS encouraged me to continue the course with only 4 students so that they could finish and go out and tell others about their experiences. Hospital personnel were supportive and

maintained contact with me to make sure I had everything I needed. Sylvia made sure we had refreshments were there the last day and that the room was comfortable.

- Yes. The room and facilities were good. Sylvia Sandoval coordinated everything very well and made sure we had all the equipment we needed, especially during the last day when students gave their presentations.
 - MMC did everything to make the course as effective as possible. Sign-in sheets, classroom space, and refreshments were available daily, and if I needed to make copies or borrow an overhead marker or anything else, MMC Education staff was very helpful. Both Julie Neal and Carter Campbell were particularly helpful in discussing some of the people in the class who needed to improve their presentation skills.
 - Yes. For some reason this course drummed up recruits (don't ask me how). Sylvia attended the last course and brought her speaking expertise to the class. Having a co-teacher released to attend showed support for the class as well.
5. **Did the Step Ahead Directors do their job of coordinating for effective delivery of the course?**
- Course books were available for us and very useful. Dr. Bernhardt observed one class and provided us with helpful feedback. The Step Ahead Directors are always available for questions and guidance with whatever course is being taught.
 - Course books were available for us and very useful. The Step Ahead Directors are always available for questions and guidance with whatever course is being taught.
 - Yes. Coordination and timing were effective.

NOTE: During the last day when students gave their presentations, one student came late. We waited about 10 minutes for him to arrive since this was a class project. We began without him and he walked in during the first presentation. Two students went over their time limits so that when the last student went up to present it was already 4:00 p.m.. The students had no problem remaining, but the presenter was called away to an emergency in pulmonary services just has be began. He was probably our best speaker so I did not mind that he could not give his talk. But that does place an emphasis on the importance of ensuring that students arrive on time (especially the last day) and that they stay within their time limits. Dave has agreed to speak during the next class.

- Director Steve Bernhardt was always available for questions and guidance and continuously asked how the class was going. He is very supportive.
- Yes. I think that encouragement at Presbyterian for running classes during this tense time helped keep the program on track.

Master Summary Report on Step Ahead Class

Class:	Effective Performance Appraisals
Location:	Presbyterian Hospital(s); Gila Regional; Memorial Medical Center
Dates:	3/93; 6/93; 4/93; 6/93; 5/93; 2/93; 2/93
Completion Totals:	6,5; 6,6; 12,11; 17,17; 13,13; 26,24; 8,8 = 84/88 = 95%

Course Evaluation

	5 Excellent	4 Good	3 Average	2 Fair	1 Poor
Instructor's knowledge of subject matter or course material presented	54 (66%)	27 (33%)	1 (1%)		
Instructor's presentation of course materials (clear, concise, organized)	54 (66%)	23 (28%)	4 (5%)	1 (1%)	
Instructor's ability to answer questions clearly and appropriately	54 (66%)	26 (32%)	2 (2%)		
Instructor's manner (friendly, helpful)	71 (88%)	9 (11%)	1 (1%)		
Value of course materials or handouts	45 (55%)	33 (40%)	3 (4%)	1 (1%)	
Relevance of skills learned to your job or work situation	47 (57%)	31 (38%)	3 (4%)	1 (1%)	
Your overall evaluation of this course	54 (66%)	24 (29%)	3 (4%)	1 (1%)	

Open Ended Questions and Comments

1. What did you find most valuable about the course?

- Performance appraisals
- The discussion from the group
- Real life situations from fellow managers
- Interacting with other managers
- Materials & discussion
- The information & interaction during discussion provided insight into my situation
- The difference between goals & objectives; tips to help in motivating people
- Information on feedback; Ann's way of presenting
- Suggestions regarding how to deal with the more difficult employee and their performance
- Examples & discussion
- Handouts
- The sharing of common problems and solutions
- Ann gave us enough examples if we didn't understand; Ann called on everyone so no one could be silent
- Writing objectives are measurable; motivating people
- Workbook and the class discussion w/ responses by facilitator
- Discussion & exercises about objectives. I often use goal setting, but I wasn't consistent about how to assess the goals
- How to write specific objectives. How to present good/negative/neutral feedback
- How to talk to employees
- Feedback
- Understanding the purpose for appraisals
- Better able to set more specific objectives
- Understanding the purposes for appraisal
- Suggestions, ideas & direction on how to make the appraisal easier by providing feedback all year
- I find this course very good and valuable to me
- Positive reinforcement re: I am doing a reasonably good job as a supervisor. Also that my managers have done a poor job in the past
- I am always pleased to find a step by step process to follow since evaluations are not something I do well.
- Comments from other dept. represented on how they view & handle the appraisal process
- Better tools to utilize in performance appraisals
- Versital
- The whole course was most valuable
- Goals & objectives; motivational process & procedures

- Putting notes in employee file during the year. Setting goals and objectives for the employee
- It was interesting to hear other divisions (in hosp.); ways of evaluating, motivating & providing feedback. I got a lot of good tips on how to effectively talk with co-workers.
- Concept of evaluation primarily as a tool for future planning
- All the information given and discussion with others
- My performance and my motivation
- book for reference
- Clarified my role in appraisals
- Explanation of appraisal process
- Good, guide line for written performance appraisal
- To actually write need statements in the form of objectives
- All
- New ideas - or ideas reenforced
- What's important about appraisals - keeping notes through-out the year. Feedback
- All of it, esp. goals, objectives, motivation & feedback
- Understanding feedback, and objectives
- Openness
- Sharing w/other supervisors some ideas
- Sharing; Listening to ideas
- Everything-the discussion, the ability to see how others in the PHS work, & the instructors
- Handouts, comments from others
- Ideas shared by others
- Sharing of ideas between depts. & across the system
- Other ways to motivate other than \$
- New ways of motivating employees
- Hearing suggestions & remarks about evaluation process
- It motivated me to look at "where" in the process of PFPs my employees were/are. (I've been in the position 6 wks.)
- Motivation
- Helped learning to deal w/employees better
- The feedback process
- Effective appraisal & motivations, knowing that we are on the right track with our dept. appraisals
- That PFP would change
- How to appraise employees in a continuous fashion in order to be more effective
- Interaction with other managers, learning from the experience of others
- Learning how to deliver a P.F.P. properly & successfully; learning the motivating skills!!
- How to be more objective in my appraisals; hearing others opinions
- Information given by others

- Ideas from other departments
- How to be more effective with employees and to meet goals and objectives
- I really like the appraisal checklist at the end of the book and the idea of continual feedback rather than a "once a year appraisal". Also the interaction with the other participants was excellent.
- Understanding difference between goals & objectives. Help writing specific objectives realizing I knew more than I thought I did.
- Interaction between participants
- Illustration and explanation
- How to be more understanding and to prepared all through the year for employee perf. appraisals
- Suggestions that appraisals are ongoing, not just once/yr.
- Ideas to be continuous, varied groups so different ideas are brought up, book so notes are required, visual aids

2. What did you find least valuable about the course?

- Needed 1 full day, not split in two days
- Didn't go to first 1/2 - sorry
- Coverage of subjective types of personality issues
- I thought it was all valuable
- Thought it was a great review
- I always need to review this process and try to improve so all information regardless of repetition is valued
- Some of the repetition
- Overheads
- Nothing
- Nothing
- The main points were quite clear but some role playing of actual situations may have eased some uneasiness with the ability to carry out the process.
- I did not find not one thing least valuable
- It was all interesting
- Priorities
- Group activities - open discussion is more interesting and productive
- About feedback
- Nothing
- I needed all of this
- N/A
- Appraisal scenarios
- Late Friday afternoon
- Most info already in use
- Slow moving! - at times became bored - exercises too repetitive (people by end were starting to discuss things not related to course)
- Group work - do the booklet before class & then discuss responses. It would save a lot of time

- Exercises that we did were good - however, instructions (written) were not always clear
 - I don't feel a class of this nature has a least valuable
 - Everything was valuable
 - Not enough time to complete exercises
 - I enjoyed the workshop & I think every level of management could benefit some. The workbook instructions sometimes weren't very clear (maybe a little complex).
 - Nothing
 - Actually the whole thing is worthwhile
 - Overhead projections
 - All information was valuable
 - Not enough time
 - Filling in the blanks for motivating employees
 - Separating the class into 2 days
3. See chart above.
4. How did you learn about the course?
- Management newspaper
 - Memo's
 - My supervisor
 - Flyer
 - In a PFP update
 - Work
 - Education memo from Joe
 - Continuing communication with Step Ahead personnel
 - Hospital education
 - Education office
 - Education memo
 - By memo from Director
 - Flyer
 - My manager asked if I would be interested. I thought I would learn because I do give them. I can always learn in this in my job.
 - flier
 - Through education department
 - Flyer from education
 - Flyer
 - From my supervisor
 - My Immediate Supervisor
 - From feedback
 - Manager
 - Marion Hopper (in education)
 - Through Carter-Educ. Dept. MMC
 - I learn how to be more organized
 - My manager
 - Flyer
 - Educational flyer

- Education Dept. flyer
- Departmental Director made it mandatory
- Through my Dept. Director
- Manager & Assistant; also handouts
- Education Department flyer
- Through unit manager
- Flyer from manager
- Education Dept. handouts
- Thru educational calendar
- Through memo @ AGH
- Personell director
- Through Education Department
- Through PHS
- Provided by AGH
- Work
- P.H.S.
- Through Administration
- Calender, Lynette & handout
- Offered thru the hospital
- Inter office mail
- Memo
- Flyer
- That there is always room for improvement
- Flyer
- Handouts
- Memo
- Thru my boss
- Signed up by super
- From my supervisor
- My supervisor asked me to attend
- Flyer
- Through PHS
- Was signed up
- Mail
- Memo
- Memo
- Advertisement in caf.
- Inner office flyer-cafe flyer
- Sylvia Sandoval-Gena J. Human Resources
- Flyer
- Human Resources
- Flyer from lab supervisors meeting
- Memo
- PHS sent flier
- Information that I can use
- Mail

- From dept. director
- Memo regarding class
- 5. Any additional comments or suggestions.
 - Ann & Gena were both very prepared and willing to share their knowledge.
 - Would like to have courses given at workplace for more participation with all or majority of employees (from Rio Rancho)
 - Offer more of these
 - We could have gone on all afternoon; the discussion was valuable and very informative
 - Good job. An even greater job handling the more "resistant" audience members!
 - Maybe
 - Need a little more control with some of the attendants getting off the subject
 - Compress into an afternoon
 - Feel this subject should have more indepth help on actual writing the appraisal
 - Perhaps a tool to help track progress of employee goals and objectives would be useful to managers in motivating us to do frequent, appropriate feedback
 - Not 3 1/2 hours in length - maybe more frequently & shorter time
 - These classes are excellent, but I would like to seem some classes offered to production are workers in feed services dept.
 - Course should be three days
 - Too much chit-chat that gets off the subject
 - Very well taught
 - I would like to see a course on peer review; I appreciate the team approach to your teaching methods.
 - Although this was a review in part; it was of great value-thank you
 - Excellent on motivation
 - Very knowledgeable
 - Both instructors are really knowledgeable in this subject
 - I enjoyed the class
 - Maybe add a 2nd break AM & PM even if it adds to the total time
 - Very very helpful
 - Break more often. Even just to stand & stretch
 - Good
 - More time, class slower so it will sink in better
 - Instructions on tasks were hard to understand
 - Need to try to keep group focused on learning, not just complaining about current system

- 1 day session instead of 2, three hr. blocks - would allow for more sharing
- Good, open instructors
- This was a excellent opportunity to learn and participate in the appraisal process
- Enjoyed Ann and peaceful way of relaying information days
- Should be offered yearly
- Emphasize that we need to focus on project. Not harp on past experiences - ie - PFP
- Ann & Gena a very good. Excellent @ encouraging participation and allowing participants to press positive & negative "stuff"
- Have the tool available for discussion if possible
- Valuable material or handout to share with employees
- Class needs to be longer with more participation from students
- Continue offering these classes

6. How will you apply what you learned to your job?

- Lots
- Conduct appraisals with positive attitude and provide feedback more frequently; empower employees
- Check myself for motivation skills and apply the feedback suggestions
- 1. Begin "practicing" with I learned
- 2. Keep reminders to not forget what I have learned
- Give neutral feedback; remember what not to do when giving bad feedback; remember I am not alone as a manager-there are others with the same difficulties

* Some of the people who attended Thursday did not attend Friday and vice versa, so the Course Evaluation Form does not correspond to the total number of attendees.

- Doing evaluations
- I will use this on a daily basis in dealing with my employees, as well as on annual evaluations
- I will use it tomorrow and hopefully improve from this.
- Utilizing the concept of more "at the time" feedback with notes to myself. Thank-you for coming to Silver City.
- Continue to keep log, give on spot praise and corrective action.
- Extremely helpful for future evaluations; a fresh review and I'll definitely use and implement ideas
- Do better performance evals - ongoing process

- Keeping the handbook handy
- Attitude - how to motivate staff that are unhappy by addressing their needs on a personal level
- In writing performance appraisals
- Through everyday working situations, performance appraisals, counseling
- To write better evaluations
- Being new at giving evaluation gave me a better understanding & knowledge of what I'm doing! Thank You!
- View the appraisal as an exchange of info.
- Better perf. appraisals
- I think that supervisors/managers are not the only ones who should give feedback. I will make more effort to make the people I work with feel more at ease and valued.
- Do a good job for my employees
- I will use this for doing all those evaluations, 15-20, including probationary.
- Using the book and guidelines for evaluating staff.
- Review of some basic principles; you tend to forget you need to practice all year long
- Immediate use
- Practice what's in this manual and share with employees some areas
- Through my evaluations with my employees
- Closer year-round supervision
- Pay more attention to evaluations
- Review handout throughout the year as reminder of what is effective and apply those items I have overlooked
- Use it to evaluate staff RNs that I work with everyday
- I'll try to make appraisals more goal-oriented, more specific in my comments
- When completing employee performance appraisals.
- How give my employee feedback and
- Write goals & objectives for dept. & help employees
- I will feel much more comfortable with appraisals
- Improve performance appraisals & motivation of employees
- Put knowledge into action. Practice
- This is a course that can be used through out the year
- Will actively keep chronological log re: performance of staff
- Daily
- Help guide & start the new process

- Will keep notes through-out year on each employee
- Better communicate on appraisals. Importance of keeping notes all year
- I have a six-month eval. coming up. this will help me be more objective
- Yearlong process - not just once a year peer review; motivate w/o \$
- Start PFP process now
- Assist my director
- Immediately - go back & re-evaluate my feedback skills especially positive
- Obvious - will more carefully/thoughtfully evaluate employees
- Preparation for 94 evals.
- Use in this yr & next yrs perf. eval process. Going to find additional ways to reward performance other than \$
- Have more positive PFP's
- I will continue to get employees in problem solving, give them the power-to correct problems etc.
- This course gives me the opportunity to start thinking about evaluation & collecting data
- Begin surveys-now. Review individual goals & discuss needs/expectations - begin coaching
- By writing effective PFP's
- Help motivate employee w/out money
- Learned a lot about the evaluation process; more confident about taking information back to employees
- Add to last years self evaluation - goals & accomplishments
- I will document feedback the year round
- Keep log of employees actions; make an attempt to give all forms of feedback throughout the year
- Use better motivating skills to keep employee's motivated (without the pay)
- I plan to use some of the exercises in the workbook in our dept. meetings to help me find out my staff's concerns & feelings
- In preparation of PFP's
- Overall communication with employees; motivation for self and employees
- Meet my goals
- Start adding more to my employees files-Try to address problems more quickly - I've been guilty of putting off negative feedback - time to bite the bullet!
- Im doing PFP's shortly. I have many employees. Enough said
- Many, many ways - I enjoyed this very much
- Documentation and timely shared feedback is really real to being a supervisor
- To get together with employees & work together on the job we are responsible for - not as individual but as a group

- All of it; I plan to keep this booklet handy, I still have a lot to learn though
- By writing even more down

Instructor Evaluation

1. Give your overall evaluation of how well the course went:

- The first day we had six students and the second day there were five. However, three from the first day could not attend and two new students attended the second day, so we needed to try to bring the new students "up to speed" in a short time. It is always the case with managers and supervisors that there is much interaction among trainees. This is very good for the class and the instructors. New thoughts and ideas are brought out each session.
- The course went fairly well. Most of those in attendance were there to gain some additional insight and contributed well in class discussion. We were able to cover all of the material, but we went until 4:00 p.m. instead of 3:30.
- The course went very well. We had a vocal group which kept interaction at a level where it needed to be. We needed more time at the end to wrap it up.
- The course went well. Bruce and I are catching on fast as a team and seem to be at ease developing relationships and trust with students. As a result, this group was not afraid to ask questions and we were able to adjust to different discussions and still cover most of the course materials.
- The course went well. This was the first time Bruce taught this class and the students related well to him. This group was not afraid to ask questions and we were able to cover much materials.
- This was the first time this course was taught. It was requested by PHS and went over well. Two more sessions planned for February. It was difficult at first getting beyond the concept of appraisals strictly for pay, but we were able to go on and discuss feedback and motivation without going back to the issue of pay for performance. Because the attendees were supervisors, they were not afraid to speak and it was good to have their input.
- We had eight students who asked a lot of questions and who were very challenging. This was good. It kept us "on our toes" and allowed us to use many scenarios in the book so we could continue to work back and emphasize important information.

2. What did you observe or what did students volunteer that made you think the course was effective?

- Interaction and discussion among the participants was important. good ideas were exchanged. One supervisor stated that she had given even negative feedback to her employee in front of others, and the group was able to discuss this and convince her in an unthreatening environment that this may not be the most effective way to provide feedback. There were a lot of good questions.
- Students began to ask questions and put the pieces of the course together early. We had good discussion throughout the day. We were slowed down a little in the morning so had to take additional time in the afternoon and no one indicated a need or desire to leave. Student comments as they left were positive.
- Interaction and discussion among the participants was important, and there was lots of it. Good ideas were exchanged. There were a lot of good questions. Everyone seemed to appreciate the problems associated with other departments.
- Students began to ask questions and put the pieces of the course together early. We had good discussion throughout the day.
- Students began to ask questions an put the pieces of the course together early. We had good discussion throughout the day.
- The group interaction was very effective. They were able to share and learn from one another through the responses they gave in the exercises. They asked good questions and provided good examples for us all to work with. They seemed very attentive for the most part.
- The students asked several questions and shared much information with each other. Some began to view goals and objectives differently than they had before and were able to see how the interpretation in the coursebook could help them in their positions. Feedback was very important to them and brought about a lot of discussion.

3. What interfered with the effectiveness of the course?

- There was some confusion about what dya or days the workshop was going to be offered; however, we were able to work with that.
- We had one supervisor who has been a supervisor for the military and in many healthcare situations throughout the years. We had difficulty communicating with him at times and wondered why he chose to attend the workshop. Also, attendees were interrupted throughout the

day and this affected the concentration of others in the class. We did our best to overcome these distractions and maintain organization.

- Nothing.
 - The nurses do a peer evaluation and that took up some time for discussion. We were concerned that others might lose interest. However, the nurses also appreciated what problems there were in other areas and allowed time for those departments, so it balanced overall and worked well within the limits of our discussions.
 - Nothing. the course went well. One person played "devils advocate" with many topics, but that just generated good discussion and communication.
 - The concept of the performing appraisals only for pay was really difficult to get beyond the first day. After we were able to take them away from that, discussion improved. Maybe having this go through 5:00 p.m. on Friday afternoon hurt somewhat, but not to the extent that I wouldn't do it again.
 - The concept of the performing appraisals only for pay was difficult to get beyond during the first day, but before the day was over students were looking at the appraisal as an effective tool and could separate pay from performance.
4. Did the hospital do its part to recruit students, provide an appropriate classroom, provide refreshments, and generally coordinate course delivery?
- The hospital did a good job of recruiting students. The classroom was very good and refreshments were always available. PHS had the equipment we required and it was always there. Sylvia and Gena were more than willing to provide any help and were always available if we needed them. The number of attendees dropped, but the Presbyterian system for performance appraisal was almost at an end for this year, so many supervisors may not have seen the need for it at this time.
 - Yes. The room and facilities were good. Summer is always a difficult time to get people together, but we wanted the opportunity to reach some of the personnel at Gila Regional so they might become more familiar with our program. Lunch was provided in the room. This was an excellent idea because it allowed us to have additional discussion and keep everyone together so that we could work into the afternoon session easily.
 - The hospital did a good job of recruiting students. The classroom was very good and refreshments were always available. MMC had the

equipment we required and it was always there. Becky was willing to provide any help and was always available if we needed her.

- Yes. The room and facilities were great, and the facility was away from the main building to reduce interruptions from work. This was quite effective and kept interruptions to a minimum. The class size was good; the idea of having lunch there was a tremendous help, and everyone seemed to enjoy it.
- Yes. The room and facilities were good, and the facility was away from the main building to reduce interruptions from work. This was quite effective and kept interruptions to a minimum. The class size was good.
- The hospital did an excellent job of recruiting students, as evidenced by our enrollment. The classroom was very good and refreshments were always available. PHS had the equipment we required and it was always there early so we could be set up and ready for the class. Human Resources personnel were more than willing to provide any help and were always available if we needed them.
- The hospital did an excellent job of recruiting students. The classroom was very good and refreshments were always available. PHS had the equipment we required and it was always there. Sylvia and Gena were more than willing to provide any help and were always available if we needed them.

5. Did the Step Ahead Directors do their job of coordinating for effective delivery of the course?

- This has become a necessary course for supervisors to enable them to understand the needs of their employees. Dr. Bernhardt has continued to be available for questions and guidance as this course was being prepared and as it becomes scheduled in the hospitals.

NOTE: This course appeared to be very valuable for many of the participants. I would recommend that in the future, Effective Performance Appraisals be offered yearly to new supervisors and any who would like to update their own appraisal skills.

- Yes. Coordination and timing were effective. The one-day format seemed to work well.
- This has become a necessary course for supervisors to enable them to understand the needs of their employees. Dr. Bernhardt continues to be available for questions and guidance as this course was being prepared and as it becomes scheduled in the hospitals.

Note: The more I offer this course, the more need I see for it to be extended to at least 8 hours.

- Yes. Coordination and timing were effective. The one-day format seemed to work well.
- Yes. Coordination and timing were effective. The one-day format seemed to work well.
- The project's outside evaluator was visiting and she and Dr. Bernhardt attended the first day's session. Ms. Robinson participated with the group sessions and Dr. Bernhardt offered input and helpful feedback with the session. We appreciated their interest and support for this project. The *Step Ahead* Directors are always available for questions and guidance with whatever course is being taught.

NOTE: This course appeared to be very valuable for many of the participants. I would recommend that in the future, Performance Appraisals be offered yearly to new supervisors and any who would like to update their own appraisal skills.

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Step Ahead Follow-up Interview Summary

Ann Wallace

Eighteen participants in Straight Talk were interviewed from 3-6 months after participation in the class to track long term effects on the individuals and on job performance. The questions were designed to elicit more detailed responses and to minimize "Yes-No" responses. Participants were encouraged to discuss in detail their experiences in the course and the results since the course. What follows summarizes the interviews.

- **What key points, if any, do you remember from the course? What stands out in your mind about the course?**

Students answered that they remembered most the instructors, role playing, confrontation, and calming people down.

- **Have you had the opportunity to use the skills you learned in the course? What materials or skills, if any, do you still use. How often do you use them? Do you ever refer to the course book?**

Most interviewees answered yes to the question asking whether they have had the opportunity to use the skills learned in the course. The skills they use most often include paraphrasing, empathy or putting themselves in other's positions, and having different ways to handle the same problems. They indicated that these skills are used daily.

- **How has the course helped or hindered you in your job? Can you think of a particular incident or event where the course helped or hindered you? Tell me about it.**

For every participant, the answer to the first part of this question was that the course has helped. Examples of ways in which the course has helped have been in attempting to calm down angry clients or upset co-workers and hospital personnel.

- **Have your job duties changed or have your responsibilities increased since you took the course? Can you give me an example?**

Although job duties or responsibilities had not changed for some of the participants, many reported that there have been increased responsibilities. Examples of these included answering phone calls from upset people; taking over the lines for shipping and receiving; calling clients to ask if everything had gone all right for them during the past two weeks; handling payroll and the questions involved from personnel; and problem solving with Medicare and Blue Cross/Blue Shield. All of these examples involved the requirement of enhanced communication skills.

- **Has your supervisor or manager been supportive of your efforts or recognized your course work in any way? If so, how? Can you give me an example?**

Many participants indicated that their supervisors had been very supportive. One student stated that his or her supervisor had comments about how employees have grown; another reported that the supervisor tells employees when they have handled a difficult communication well.

- **Have your coworkers been supportive of your efforts or recognized your work? If so, how? Can you give me an example?**

Almost all participants believed that co-workers were supportive, especially those who took the course together. One person received a *Catch Me* award and believes that the award was a direct result of her better communication skills. Participants stated that the skills they learned in the *Straight Talk* course helped them cope with difficult communication situations among themselves and their co-workers.

- **Are you more aware of language and communication, both your own and that of other coworkers, other supervisors, or other areas of the hospital? How do you use this awareness? Has it helped you in your job? In what ways?**

Most of the students answered that they are more aware of language and communication since they have completed *Straight Talk*. They said that when they have certain difficult communication situations at work, they try to think about how such a problem might have been handled in class and/or in a role play. They are particularly aware of situations involving those staff who did not take *Straight Talk*, but could have benefited from it.

- **What was your attitude toward your job, your coworkers, or your work area when you took the course? Has your attitude changed? If so, how?**

Student attitudes toward their jobs has remained much the same as before they enrolled the course. Some believe their attitudes have changed in a positive direction. Many stated that they have become more comfortable dealing with difficult people.

- **What was your attitude toward the course or instructor when you completed the course? Has your attitude changed? If so, how?**

Overall, students were excited about the course and felt that the instructors made a big difference. Personal examples provided by the instructors were good and very helpful, and students could feel comfortable discussing issues.

- Would you take another course if you could fit it into your schedule? Which course would you take? Would you or did you recommend this course to others in your group?

All students agreed that they would take another course. They were interested in *Write Stuff* and/or *Effective Presentations*. They would also be interested in enrolling in a follow-up of *Straight Talk*. They would definitely recommend *Straight Talk* to any other staff who have not yet enrolled.

**Straight Talk Evaluation for *Step Ahead*:
Executive Summary**

Bruce W. Farmer

August 18, 1993

RUNNING HEAD: STRAIGHT TALK EVALUATION

Straight Talk Evaluation for Step Ahead: Executive Summary

This study evaluated the Straight Talk course taught at Memorial Medical Center to determine whether or not participants perceived changed communication behaviors and whether or not they perceived positive results from these changed behaviors as a result of the training.

Study Design and Methodology

Description of Participants and Sampling Method

Straight Talk, the oral communication skills training course, was selected for evaluation for this study because of the critical nature of oral communication at MMC, and a purposive sample of participants from that course was chosen for interviews. The sample consisted of all members of three departments who had completed the course and who were still employed by the organization. The three departments were selected because a significant percentage of each department had attended the course during a short time frame, and time frames for each department had been separated by large periods of time, nine months to one year. This provided a basis for evaluating similar groups and for evaluating the training itself at three specific time points.

Participants from Department A completed the course during April-May 1992. All four participants who completed the course were interviewed, along with a supervisor who had not completed the course, but who had observed the participants before and after the training. Participants from Department B completed the course during April-June 1991. Seven of the nine participants who completed the course were still employed and were interviewed. Participants from Department C completed the course during October-December 1990. In this department, all members had completed the course in 1990 by management direction. Of the twenty-four original participants, eleven were still employed and were interviewed. This gave a total of twenty-two participants and one supervisor who were interviewed for this study.

Measures Used and Rationale

In order to gather self-report data from participants concerning changes in behavior and perceived benefits, a scripted interview form was developed. Questions were arranged in a funnel order, asking participants first to remember anything they could about the course and then asking for more detail as they provided more detailed information. If specific skills were recalled or described, additional questions were listed about a specific incident of using that skill or what the result had been. In no case were specific skills listed in the questions or asked about in the follow-up or probing questions in order to avoid researcher bias or leading as much as possible. Finally, the questions were reviewed by the training program project directors for any additional comments or suggestions.

Procedure

Supervisors' approval was obtained for interviewing their employees, and then individual employees were contacted and interview times were scheduled. All interviews were audiotaped. Partial transcriptions were made of all tapes for ease of reference, and these were examined for explicit reference to any of the skills listed above, as well as for descriptions of use of skills without actually naming the skill. Repeated themes or reports of benefits of using the skills were marked for later analysis and grouping.

Results

General Findings

Of the twenty-three participants who were interviewed, all but one reported either observing or experiencing some changes in behavior and positive results attributed to the training. Participants often could not name the skills that were taught in the course, but they then went on to describe the use of skills later in the interview. This was particularly apparent in Department C which had completed the course in late 1990. Seven participants volunteered the observation that they used the skills with children or with other family members, providing a broader definition of environment than simply the workplace. Finally, six participants volunteered the observation that they used the skills automatically, without consciously thinking about them.

Specific Findings

Table 1 shows that participants report perceives changes in communication behaviors as a result of the training, and these persist over a period of nine months to nearly three years.

Table 1. Perceived Behavior Changes By Skill as Reported by Participants

Skills Reported as Remembered or Used by Participants	Number Who Remembered/Used
Active listening	6 / 12
Paraphrasing to clarify or understand	10 / 5
Dealing with feelings and emotions	8 / 4
Empathizing	3 / 3
Communication styles	0 / 2
Non-verbal and body language	1 / 2
Discussing and controlling conversations	3 / 2

Table 2 shows that participants report perceived positive results from the changed behaviors that they reported in Table 1.

Table 2. Perceived Positive Results Reported by Participants

Positive Results Reported by Participants as Repeated Themes from Interviews	Number Who Reported
Better group communication and less tension	9
Improved family and personal communication	7
More teamwork and smoother work flow	5
Positive attitude change toward job, work area, coworkers	5
Reduced anxiety and less communication apprehension	3
Miscellaneous (Stress reduction, recognition from supervisor or peers, increased self-esteem)	6

Patterns and Contradictions Among Data Sources

The patterns observed in the interviews were remarkably consistent, with the exception of the single individual who reported no benefits from the program. This individual stated that when he was involved in working he was not "thinking about using skills from some communication class he had taken." This seemed to reflect a perception that he had to think about the skills to use them, and it contradicts the reports from six participants that they use the skills automatically.

Reports of perceived benefits from participants were often confirmed by other participants who observed the same events. This confirmation lends credibility to the self-report data and adds validity to the findings reported above.

Discussion

Personal interviews provided an excellent means to gather anecdotal data and personal success stories. For example, one participant reported seeking out difficult patients to work with, and he reported great success in doing so. Another reported understanding himself and his response to stress better after the course. This led him to request a change in job assignment rotations so as to balance his work in stressful areas, and he reported being much happier since the change. Still a third reported increased self-esteem and confidence in communication which led her to apply for a different position. Her supervisor recognized her new skills and supported her application, and she was given the job.

Role-playing was a significant part of the course structure for the oral communication course, and it was one of the features of the course that was mentioned by many participants as being very helpful, along with the importance of the role plays using real-life situations to improve relevance to the transfer environment. This suggests that role-playing should continue to be a major part of communication training.

The importance of practice and feedback emerged in comments by participants in the two larger departments. Participants reported using the skills with each other during and after the class in what might be called a manner of joking self-awareness. They would recognize when one or another was trying to use or practice a skill and would comment on it. As skills began to be used more naturally, this self-awareness diminished, but it was very important as a source of reinforcement using practice and feedback immediately following the class. The participants in the smallest department did not report this awareness and practice, and at least one participant thought that the course would have been more effective if more people from the department had taken it. This suggests two implications for training design and delivery. First, to the extent possible, large or intact groups should be trained or encouraged to participate concurrently. This will facilitate the use of the practice and feedback which was so important to changing the communication behaviors of participants. Second, if possible, follow-up sessions should be scheduled for participants several months after the initial training. This was suggested by several participants and would provide for intensive practice and feedback after a period of using the skills and incorporating them into a repertoire. It could also provide an opportunity to use actual situations in role plays, and could provide an excellent setting for evaluation of behavior changes by trainers.

Another important finding was confirmation of the importance of the classroom or workshop experience itself. One of the reasons for Department C attending the class as a group was a perception by management that communication had broken down in that department and that it was affecting work. Many participants reported that one of the primary benefits of the class was simply having a safe place to discuss problems and to work out communication problems with coworkers and supervisors without fear of retribution. In this case, the trainers acted as facilitators to allow the problems to surface and be discussed. Several participants commented that it would be good to do that again and to incorporate the new people in the department, a suggestion that may be worth pursuing.

The study limited itself to self-report data from participants only, with the exception of one supervisor, and it could benefit from triangulation of observations by coworkers and other supervisors. While there was some confirmation of data by cross-report by participants, it was limited and informal. This should be remedied in the continuing studies planned in the future.

Conclusions

This study found that, at MMC, participants in formal communication training perceive behavioral changes which they attribute to the training, and these behavioral changes persist over time. Further, these participants report positive results from the use of the changed behaviors, thus establishing a perceived positive effect due to the communication training program. This suggests that the decision to use communication training at MMC was worthwhile, especially for those employees who participated. Given the uniformity of responses across the three departments examined, one could expect that a decision to continue the training could be expected to produce similar favorable results in other departments. Given that similar organizations exist in other cities, it is possible that the training results may generalize to these other organizations, but this study did not address that issue.

**A Case Study of Evaluation of Communication Training
Effectiveness in the Workplace**

Bruce W. Farmer

Communication Studies 570

Organizational Communication

May 14, 1993

RUNNING HEAD: COMM TRAINING EVALUATION

A Case Study of Evaluation of Communication Training Effectiveness in the Workplace

Introduction

By any standard, corporate training is big business today. Estimates of the amount of money spent by corporations on training as far back as 1985 ranged from \$40 billion per year (DeWine, 1987) to \$215 billion (Johnson & Kusmirek, 1987a). In addition, estimates are that businesses train as many people as the total enrollment in all of America's four-year colleges and universities (DeWine, 1987). Despite this enormous investment of both human and fiscal resources, there is little evidence that corporations have any formal programs for evaluating their return on investment (ROI) for any of these training programs. This is as much a problem for organizational communication scholars as for businesses, DeWine (1987) claims, because "For scholarship in organizational communication to continue to provide meaningful insights into communication behaviors of organizational members, it must provide the means for organizations to measure the impact of training on the organization" (p. 123). She continues, "Training evaluation is critical to the successful application of organizational communication theory and principles. Currently organizations are evaluating the reactions of participants but doing little to assess the impact of communication training on other levels of Kirkpatrick's hierarchy" (DeWine, 1987, p. 121). Kirkpatrick's four levels of evaluation (reaction, learning, behavior, and results) are discussed in detail by Goldhaber (1990) and Goldstein (1993), who agree that evaluation is a key part of any training program, and Goldhaber endorses "Kirkpatrick's system as feasible for assessing the impact of communication training programs" (p. 407). Given this

agreement on the need for evaluation, we must look to the reasons for its absence as an integral part of corporate training programs.

Goldstein (1993) defines evaluation as "the systematic collection of descriptive and judgmental information necessary to make effective training decisions related to the selection, adoption, value, and modification of various instructional activities" (p. 147). This definition fits nicely with the criticism above in that it specifies the reasons that corporations and organizational communication scholars need to take an interest in evaluation. Without specific criteria for evaluation, neither corporations nor communication scholars have any basis for selecting, adopting, valuing or modifying various training programs. In discussing the criteria for evaluation, Goldstein (1993) notes that there are both process and outcome measures, and he claims that a reliance on outcome measures alone can yield invalid evaluation of the effectiveness of a training program because of possible intervening variables. Thus he advocates an approach which combines the use of process measures, defined as "measures that examine what happens during instruction" (Goldstein, 1993, p. 170). But just as he advocates a set of information to be collected, he defines the problem facing those who would develop methods for evaluation.

One of the biggest problems in evaluating corporate training is in deciding what information to collect and how to use it to evaluate training effectiveness. It is relatively easy to assess whether the training was enjoyable through the use of a simple survey conducted at the end of class (Kirkpatrick's level one, reaction). It is also a fairly straightforward process to ascertain whether or not participants learned what they were supposed to learn through the use of observation or pre- and post-

test (level two, learning). The difficulties appear when we try to assess either behavior changes (level three, behavior) or the long-term benefits of training (level four, results), both to the employees and to the organization. One of the main reasons for these difficulties is that the effects of training must be assessed or evaluated in an environment which has numerous other forces which affect employees and their interactions with others. It is difficult to determine which observed effects are due to the training and which are due to other forces.

While there are some ways to minimize the effects of these intervening or moderating variables on an evaluation, many trainers are not willing to invest the necessary time. This is unfortunate, since effective evaluations are key to revising and modifying training courses to ensure that they achieve the desired results. And the problem is compounded by a lack of supportive research on the part of organizational communication scholars to provide the means for assisting with the evaluation process within organizations. A review of the literature confirms this view.

Literature Review

The literature abounds with reports of poor or non-existent evaluation programs (Corder, 1988; Johnson & Kusmierek, 1987a and 1987b; Mattox & Smith, 1983), calls for more evaluation (Goldhaber, 1990; Goldstein, 1993), pleas for standardization of evaluation methods (DeWine, 1987; Stevens & Hellweg, 1990), and reports of ineffective training programs (Baum & James, 1984; Elmes & Costello, 1992). Meanwhile, reports of successful training programs focus more on method of training and evaluation of specific programs (Anderson & Sharpe,

1991; Dickson, 1989; Evans, Stanley, Mestrovic, & Rose, 1991; Gray, Buerkel-Rothfuss, & Yerby, 1986; Hudson, Doyle, & Venezia, 1991; Kurtz, 1982; Morrow & Hargie, 1986; Rybczyk, 1987) and less on general effectiveness, despite the widespread belief in the benefit of such programs (Bell & Kerr, 1987; Armstrong, et al., 1986), and few reports exist of generalizable methods for evaluation.

Reasons for Lack of Evaluation

Among the reasons cited for lack of evaluation, management attitudes account for a significant portion. Management is often unwilling to spend the money necessary for effective evaluation (Goldstein, 1993). Lack of understanding of the importance of evaluation contributes to this unwillingness, and is cited by Bell and Kerr (1987) and by Goldstein (1993), while Bell and Kerr also report that management believes inherently in the benefit of training and sees no need for evaluation. This inherent belief is similar to the attitude found by Armstrong, et al., (1986), who surveyed nurses, dentists, and doctors and found that most considered communication training necessary and valuable at several educational levels.

In addition, Corder (1988) and Johnson and Kusmierek (1987a, 1987b) found that training directors and Human Resource (HR) consultants and managers believed in evaluation and did perform some form of evaluation, but did not evaluate training programs in sufficient detail to assess results or behavioral changes. Corder (1988) reported that there were no baseline measurements established to allow for assessment of changes due to programs. Finally, Stevens

and Hellweg (1990) believe that the lack of standardized instruments and guidelines contributes to the lack of ability to compare programs in meaningful ways.

Recommendations for Evaluation

Recognizing the problems caused by lack of training program evaluation, several researchers have proposed methods to address the issue. Stevens and Hellweg (1990) call for standards of evaluation which allow for comparison of results across methodologies and training formats, and they also call for investigation of the appropriate time frame for evaluating results. They acknowledge DeWine's (1987) Training Impact Questionnaire (TIQ) as a useful contribution to assessing reaction and behavior, levels one and three of Kirkpatrick's hierarchy (Goldhaber, 1990; Goldstein, 1993), and call for additional validation of this instrument. DeWine (1987) presents the TIQ as a validated instrument for assessing reaction and behavior change concerning a single skill through self-report data.

Goldhaber (1990) presents a candidate method of evaluation which addresses all four levels of Kirkpatrick's hierarchy and offers an example of its use. Similarly, Bell and Kerr (1987) suggest methods for evaluating each of four levels which resemble Kirkpatrick's levels, and they also present a practical example of their use. The International Communication Association has developed the Communication Audit (Goldhaber & Rogers, 1979) which can be used to assess various elements of communication in organizations, and changes in communication elements can be effective indicators of changes which may be due to training. McLean (1988) argues for the use of surveys to assess communication

climate (Falcione, Sussman, & Herden, 1987) and presents a proposed format and a series of questions which could be used to construct a customized climate survey. He argues that a customized survey will be better able to address organizational goals than a general survey.

Finally, several researchers note limitations and pitfalls in methods of evaluation. Johnson and Kusmirek (1987b) discuss self-report methods and note that "The limitations of self-report data have been noted by many researchers and careful attention should be paid to ensure that these limitations are not overlooked when interpreting evaluation data" (Johnson & Kusmirek, 1987b, p. 155). One of these limitations was discussed by Sprangers and Hoogstraten (1989) who found that response shift bias was a factor that needed to be considered when administering evaluation instruments which relied on self-report data prior to training. Response shift is a change in a participant's internal standard for determining his or her level of functioning on a given dimension. Response shift bias can be prevented by administering a behavioral pretest which reduces the potential for response shift and allows comparability between pre- and post-training self-report data. Johnson and Kusmirek (1987b) also warn evaluators to be sure they understand what it is that they are evaluating. They claim that "Many HR trainers confuse the results of implementation evaluations with instructional and job performance effects....It is gratuitous to assume a positive relationship between trainees' or trainers' level of satisfaction and instructional and job performance effects...In essence, HR trainers are hypothesizing a causal relationship between participation in a training program and instructional effects without adequately testing the relationship" (Johnson & Kusmirek, 1987b, pp. 155-156).

Reports of Successful Training Programs

As noted above, most reports of successful training programs focus on the relative effectiveness of one training method over another, or they report success for a particular program, but for the most part they do not provide the evaluation standards called for by Stevens and Hellweg (1990). Still, there are some lessons to be learned from a review of several of these programs. In one large study, Anderson and Sharpe (1991) used effect sizes to attempt to generalize and synthesize results from 40 interventions to improve communication skills. They found the largest effect sizes for modeling and skill-practice interventions, and they also found large effect sizes for interviewing skills targeted at medical students. Several other studies also looked at various training interventions for medical and health services personnel. Dickson (1989) looked at the interpersonal skills and communication skills of health workers and discussed areas of inadequacy such as listening skills, suggesting that one cause may be neglect of education and training. He presented a format for training which helps to develop a repertoire of behaviors. Burnett and Thompson (1986) described a communication project that convinced medical students that the quality of information available about a patient led to improved communication. They suggested a way to incorporate this communication training into early education as a means to improve communication skills. Evans, Stanley, Mestrovic, and Rose (1991) evaluated a communication skills training program for medical students designed to increase their diagnostic efficiency. Results showed that the trained group greatly increased their interviewing and interpersonal effectiveness, and were significantly more efficient at eliciting full, relevant data from patients. They also took no longer than untrained

control group participants to elicit the information. Kurtz (1982) described a communication training program for second year medical students which focuses on giving information to patients. Key parts of the course are opportunities to observe and practice skills and to integrate them into an effective repertoire. Opportunities for additional practice are available in the third year. Sellick (1991) found that training in helping skills for nurses was effective in spite of differences in results on the Fundamental Interpersonal Orientation - Behavior (FIRO-B) instrument. Morrow and Hargie (1986) found a need for communication training for pharmacists to supplement the usual scientific and technical continuing education. They evaluated a course using lecture, small group practicals, and discussion and found the results to be positive for professional practice.

In more general studies comparing methods of training, Gray, Buerkel-Rothfuss, and Yerby (1986) compared personalized systems of instruction (PSI) and lecture-recitation formats and found significant improvement in communication apprehension reduction, improved self-esteem, and course satisfaction with the PSI format. Hudson, Doyle, and Venezia (1991) investigated outcomes of communication skills training with high school students and found that role-playing exercises in small groups were effective. Mattox and Smith (1983) assigned newspaper managers to treatment and control groups and presented communication skills training to the treatment group. Using descriptive instrumentation consisting of reports from supervisors which evaluated management communication behaviors and performance in eight critical areas, they compared reports before training and four months later and found a trend toward improved behavioral and performance scores over the four month period. Rybczyk (1987) suggests a model for training

which uses behavioral modeling with opportunities for practice and feedback. He notes that practice is essential for skill acquisition and that feedback is necessary to allow participants to revise their skill usage and to improve.

Finally, Papa and Graham (1991) presented a study which tailored communication skills training for management based on the results of a diagnostic assessment. Assessments used skilled observers and surveys and were based on twelve behavioral dimensions. They found that managers receiving skills training focused to their needs as identified from the assessment achieved significant improvements over the control groups in interpersonal skills, problem solving, and productivity. Also significant in this study was the length of time between the training and the evaluation. As they note, "Perceptions of managerial performance, measured one to two years after the conclusion of some of the training programs, showed a significant increase in perceived performance over time. These findings suggest that some of the training programs do in fact influence perceived performance over an extended period of time" (Papa & Graham, 1991, p. 382). These results support the idea that focused training will be more effective, and that needs assessment is a critical part of any training program. As they note, "Without sufficient diagnosis of trainee needs, trainers cannot design effective programs or hope to evaluate such programs objectively" (Papa & Graham, 1991, p. 369).

Reports of Unsuccessful Training Programs

Although few, the reports of unsuccessful training programs provide some interesting insights and comparative information for training designers and evaluators. Relative shortness of the training session and the length of time

between pre- and post-test were suggested by Baum and James (1984) as the reasons for failure of a half-day Social Style Training Workshop on employees in a state agency. The purpose of the training was to help employees understand their own social style and use this knowledge to improve their communication with others. Using the Communication Audit before the training and four months later, little change was noted. Finally, in a fascinating study, Elmes and Costello (1992) reviewed a communication skills training program and interpreted the training as social drama designed to sustain and mystify bureaucratic control. They claim "that a communication 'skills' technology often serves the covert purpose of obfuscating and mystifying managerial communication in order to maintain the bureaucratic social order.... We define mystification as the art of manipulating another's experience without being perceived as doing so" (Elmes & Costello, 1992, pp. 427-428). They suggest that training works most effectively when participants are allowed to ask questions and discuss situations in an open environment and when communication is demystified. They note that, "Since how we see ourselves is in large part a reflection of how we communicate with others, learning a new approach to communication... requires the opportunity for participants to ask and discuss important questions about the nature of relationships in hierarchical settings" (p. 443). They saw the skills as reinforcing the hierarchy, and for some employees, "being targets of the skills seemed to expose their one-down status and reveal the underlying system of domination" (p. 440). In terms of learning skills, they claim that the workshop was unsuccessful for some employees, since "what they valued about the workshop had little to do with communication skills but rather with the context and the process of the workshop experience" (p. 441).

Summary

As can be seen from the review above, there are numerous programs being reported which are in fact evaluated in some way. What is striking is that they are all designed to meet special needs and are evaluated in terms of meeting that need, which is often defined as learning a skill (level two) or changing a behavior (level three). Because needs assessment is a key part of the design of any effective training program (Goldhaber, 1990; Goldstein, 1993; Johnson & Kusmierek, 1987a and 1987b), and because needs assessment will be combined with a review of organizational goals and current knowledge, skills and abilities (KSAs) before program implementation (Goldstein, 1993), it may be nearly impossible to develop standard methods of evaluation as called for by Stevens and Hellweg (1990). In fact, there are arguments for evaluation criteria being built in as the programs are being developed, which implies different criteria for each program, and there are also suggestions that customized surveys are the most appropriate methods for evaluation (McLean, 1988). The most important thing seems to be at present that evaluation be done at a level beyond the simple reaction sheets (level one) and the occasional pre- and post-test administered immediately after the class (level two). In addition, evaluation at other levels should attempt to establish a relation between the levels, such as learning causing behavior or behavior causing results. This suggests the following set of research questions.

Research Questions

RQ1: How does formal communication training in oral communication skills affect communication behaviors?

This question looks for changes in behavior reflecting transfer of the training or learning to the work environment or to another environment. This transfer will correspond to Kirkpatrick's third level of evaluation, behavior (Goldhaber, 1990; Goldstein, 1993).

RQ2: Do changes in communication behaviors yield positive results for individuals?

This question looks for results of behavior changes potentially identified in RQ1 to see whether these results are positive for the individual. Since the results will not be evaluated for the organization, this question only partially addresses Kirkpatrick's fourth level of evaluation, results (Goldhaber, 1990; Goldstein, 1993).

Theoretical Perspective

Because there is no baseline data for this study, and because the research is largely exploratory, a psychological perspective (Krone, Jablin, & Putnam, 1987) will be used to determine individual perceptions of the various results of the communication skills training. Self-report data of perceived changes in behavior due to the training, and self-report data of perceived benefit, if any, of changed behaviors will be gathered. Once the data from this study are analyzed, it should be possible to develop a more rigorous quantitative approach to assess behavioral changes and results throughout the organization.

Study Design and Methodology

For the past several years, a large public organization in a medium-sized southwestern city, in partnership with the local university, has been providing training in basic communication skills to its front-line employees. The work has been done under a grant from the Department of Education specifically designed to bring training in workplace literacy and basic skills to front-line employees. The specific courses that have been taught include oral communication skills, written communication skills, reading and study skills for employees anticipating returning to school or attempting their GEDs, effective presentations, and communication for supervisors, designed for new or soon-to-be supervisors or team leaders.

While evaluation was a key part of the grant proposal for the project (Bernhardt & Meyer, 1991), only one attempt has been made to do more than evaluate immediately whether participants liked the course and whether they learned what they were supposed to learn (Ham & Acchione-Noel, 1991). There is a certain amount of anecdotal evidence concerning long-term results, but there has been virtually no formal follow-up of behavioral changes and results. This organization provides an excellent setting for evaluating the effect of communication skills training over a long period of time.

Description of Organization Studied

As noted above, this is a large public organization run by a Board of Directors, a President and Chief Executive Officer, and six administrative vice-presidents. Personnel at the organization range from highly skilled professionals with staff positions to support personnel with minimal education who are often

minorities and women, many of them with English as a second language. The departments range from those that deal almost exclusively with customers and the public to those who provide support services and deal only with internal communications. The range of education levels and communication skills within the organization is extremely broad, and the requirement for dealing with a broad cross-section of the public adds an additional burden to the communication demands on all employees, especially those front-line employees who must deal with the whole range of communication situations. The communication skills training program described above was developed to address the needs of these employees specifically.

Description of Participants and Sampling Method

Communication skills training has been presented in this organization since late 1990. Attendance lists for all courses were obtained from the Educational Services Department to serve as the basis for sample selection. The oral communication skills training course was selected for evaluation for this study because of the critical nature of oral communication in this organization, and a purposive sample of participants from that course was chosen for interviews. The sample consisted of all members of three departments who had completed the course and who were still employed by the organization. The three departments were selected because a significant percentage of each department had attended the course during a short time frame, and time frames for each department had been separated by large periods of time, nine months to one year. This provided a basis

for evaluating similar groups and for evaluating the training itself at three specific time points.

Participants from Department A completed the course during April-May 1992. All four participants who completed the course were interviewed, along with a supervisor who had not completed the course, but who had observed the participants before and after the training. Participants from Department B completed the course during April-June 1991. Seven of the nine participants who completed the course were still employed and were interviewed. Participants from Department C completed the course during October-December 1990. In this department, all members had completed the course in 1990 by management direction. Of the twenty-four original participants, eleven were still employed and were interviewed. This gave a total of twenty-two participants and one supervisor who were interviewed for this study.

Conceptual and Operational Definitions of Theoretical Concepts

Training is defined as "the systematic acquisition of skills, rules, concepts, or attitudes that result in improved performance in another environment" (Goldstein, 1993, p. 3). Using this as a basis, we can then provide operational definitions for the concepts in the research questions.

- Communication training is defined as a process that provides for presentation, demonstration, and practice of communication skills or behaviors.
- Communication skills are defined as:
 - Active listening;

- Paraphrasing to clarify or understand the situation;
- Dealing with feelings or emotions, both your own and those of the other person;
- Empathizing;
- Being aware of the different communication styles among different people, such as task-oriented or people-oriented styles;
- Body language and non-verbal communication; and
- Discussing and controlling conversations.

(N. B. - The skills listed above overlap to some extent, such as active listening being an integral part of both empathizing and paraphrasing. They are listed this way because they are taught this way in the oral communication skills course, with paraphrasing and empathizing building on active listening.)

- Changes in communication behaviors are defined as self-reports of increased or decreased use of the communication skills defined above.
- Positive results are defined as self-reports of examples of perceived improvement in an individual's interaction with his or her environment. Improvement may come in the form of improved communication satisfaction, reduced tension in the workplace, increased comfort or reduced anxiety or communication apprehension in oral communication, better job evaluations or recognition from peers or supervisors, or similar outcomes.

Note that both changes in communication behavior and positive results are defined using self-report data. Because no baseline data exists for the participants,

and because a psychological perspective is being used which places the locus of analysis in individual perception and conceptual filters (Krone, Jablin, & Putnam, 1987), this is deemed to be an appropriate method for this stage of evaluation.

Measures Used and Rationale

In order to gather self-report data from participants concerning changes in behavior and perceived benefits, a scripted interview form was developed. The questions used were based on reviews of several existing instruments as well as on recommendations and guidelines from the literature. The ICA Communication Audit (Goldhaber & Rogers, 1979) was examined for wording and approach, as was DeWine's (1987) Training Impact Questionnaire. Questions suggested by McLean (1988) for constructing climate surveys were reviewed. The proposed evaluation method suggested by Goldhaber (1990) was examined, especially for questions relative to behavior and results. Finally, the scripted interview used by Ham and Acchione-Noel (1991) was used as an example of a proven technique for evaluating the written communication training in this organization. Questions were arranged in a funnel order, asking participants first to remember anything they could about the course and then asking for more detail as they provided more detailed information. If specific skills were recalled or described, additional questions were listed about a specific incident of using that skill or what the result had been. In no case were specific skills listed in the questions or asked about in the follow-up or probing questions in order to avoid researcher bias or leading as much as possible. Finally, the questions were reviewed by the training program project directors for any additional comments or suggestions.

Procedure

Supervisors in each of the departments were contacted and the project was explained to them, noting that it had the approval of the Chief Operating Officer and the Vice president of Human Resources. Supervisors' approval was obtained for interviewing their employees, and then individual employees were contacted and interview times were scheduled. Supervisors were very cooperative and allowed employees to be interviewed on work time. Interviews were conducted in various sites, including the cafeteria or empty offices or conference rooms, in order to ensure privacy away from the work environment.

The purpose of the project was explained to each participant and they were asked for permission to audiotape the interview. All agreed to this and all interviews were audiotaped. Interviews took anywhere from 15 minutes to 45 minutes. The scripted interview was followed to the extent possible, although at times participants volunteered answers to questions out of order and these were followed up at that time. At no time did the interviewer mention any of the skills or potential benefits unless they had been explicitly mentioned by the participant first. Probing questions asked simply for elaboration or for an example of using a skill already mentioned.

Partial transcriptions were made of all tapes for ease of reference, and these were examined for explicit reference to any of the skills listed above, as well as for descriptions of use of skills without actually naming the skill. Repeated themes or reports of benefits of using the skills were marked for later analysis and grouping. This work was performed by the researcher without independent coders.

Results

General findings related to both of the research questions are presented first to demonstrate the breadth of responses, and then specific answers to the research questions are presented.

General Findings

Of the twenty-three participants who were interviewed, all but one reported either observing or experiencing some changes in behavior and positive results attributed to the training. During the interviews, the researcher was keenly aware of the potential for biased results due to a desire on the part of the participants to please the interviewer. This bias was not perceived and incidents were often confirmed by other participants, leading to confidence in the validity of the responses.

Participants often could not name the skills that were taught in the course, but they then went on to describe the use of skills later in the interview. This was particularly apparent in Department C which had completed the course in late 1990. Seven participants volunteered the observation that they used the skills with children or with other family members, providing a broader definition of environment than simply the workplace. Finally, six participants volunteered the observation they used the skills automatically, without consciously thinking about them.

Specific Findings for Research Questions

Research Question 1 asked how communication training affected communication behaviors. The responses are reported in Table 1 and are shown as

the number of participants who reported remembering the skill and the number who reported using the skill.

Skills Reported as Remembered or Used by Participants	Number Who Remembered/Used
Active listening	6 / 12
Paraphrasing to clarify or understand	10 / 5
Dealing with feelings and emotions	8 / 4
Empathizing	3 / 3
Communication styles	0 / 2
Non-verbal and body language	1 / 2
Discussing and controlling conversations	3 / 2

Table 1. Behavior Changes By Skill as Reported by Participants

Based on the results presented in Table 1, the answer to Research Question 1 is that communication training results in changes to communication behaviors, and these changes persist over a period of nine months to several years.

Research Question 2 asked whether the changes in behaviors yielded positive results for the participants. The responses are reported in Table 2 as the number of participants who reported each result. Results are shown as repeated themes which appeared in the interviews.

Positive Results Reported by Participants as Repeated Themes from Interviews	Number Who Reported
Better group communication and less tension	9
Improved family and personal communication	7
More teamwork and smoother work flow	5
Positive attitude change toward job, work area, coworkers	5
Reduced anxiety and less communication apprehension	3
Miscellaneous (Stress reduction, recognition from supervisor or peers, increased self-esteem)	6

Table 2. Positive Results Due to Changes in Communication Behaviors

Based on the results shown in Table 2, Research Question 2 is answered positively. Changes in communication behaviors attributed to communication training yield positive results for individuals.

Patterns and Contradictions Among Data Sources

The patterns observed in the interviews were remarkably consistent, with the exception of the single individual who reported no benefits from the program. This individual stated that when he was involved in working he was not "thinking about using skills from some communication class he had taken." This seemed to reflect a perception that he had to think about the skills to use them, and it contradicts the reports from at least six participants that they use the skills automatically.

Reports of perceived benefits from participants were often confirmed by other participants who observed the same events. This confirmation lends credibility to the self-report data and adds validity to the findings reported above.

Discussion

The results presented above support and extend the literature on communication training and evaluation in several ways. First, they support the results of several studies showing that communication training can change communication behaviors and that these changes in behavior can persist over time (Mattox & Smith, 1983; Papa & Graham, 1991). The results also confirm that evaluations done after significant periods of time can still provide useful data (Bell & Kerr, 1987; Papa & Graham, 1991). Second, in their reliance on self-report data

using a psychological perspective, they confirm that participants can recognize changes in behavior based on the skills taught in class and report them consistently to researchers. This finding supports DeWine's (1987) use of self-report data on the Training Impact Questionnaire, a method which was questioned by Stevens and Hellweg (1990). Finally, it extends the current literature by providing one of the few studies which looks at both behavior change (level three of Kirkpatrick's evaluation hierarchy) and results of those behavior changes (level four) in a single study. Results were found to be positive for the employees, who could report specific benefits from the use of the communication skills. Results for the organization were implied as they were by Bell and Kerr (1987), who assumed that more efficient use of time, better communication, and fewer errors would result in better productivity for employees who had been trained. Whether or not this implication is valid is a subject for future research.

The study also demonstrated the power of using personal interviews to gather evaluation data of this type. In fact, while it is possible to gather anecdotal data and personal success stories using other methods, personal interviews provide an excellent means for doing so. For example, one participant reported seeking out difficult customers to work with, and he reported great success in doing so. Another reported understanding himself and his response to stress better after the course. This led him to request a change in job assignment rotations so as to balance his work in stressful areas, and he reported being much happier since the change. Still a third reported increased self-esteem and confidence in communication which led her to apply for a different position. Her supervisor recognized her new skills and supported her application, and she was given the job.

It may have been possible to obtain this data using open-ended questions on a general survey, but it is less likely, and personal interviews should continue to supplement other means of data gathering.

Several implications for communication training design and development also emerged from this study. First, there was a confirmation of the importance of role-playing (Hudson, Doyle, & Venezia, 1991) during the training, and second, confirmation of the importance of practice and feedback (Kurtz, 1982; Rybczyk, 1987) when learning new skills and transferring them to a new environment. Role-playing was a significant part of the course structure for the oral communication course, and it was one of the features of the course that was mentioned by many participants as being very helpful, along with the importance of the role plays using real-life situations to improve relevance to the transfer environment. This suggests that role-playing should continue to be a major part of communication training.

The importance of practice and feedback emerged in comments by participants in the two larger departments. Participants reported using the skills with each other during and after the class in what might be called a manner of joking self-awareness. They would recognize when one or another was trying to use or practice a skill and would comment on it. As skills began to be used more naturally, this self-awareness diminished, but it was very important as a source of reinforcement using practice and feedback immediately following the class. The participants in the smallest department did not report this awareness and practice, and at least one participant thought that the course would have been more effective if more people from the department had taken it. This suggests two implications for training design and delivery. First, to the extent possible, large or intact groups

should be trained or encouraged to participate concurrently. This will facilitate the use of the practice and feedback which was so important to changing the communication behaviors of participants. Second, if possible, follow-up sessions should be scheduled for participants several months after the initial training. This was suggested by several participants and would provide for intensive practice and feedback after a period of using the skills and incorporating them into a repertoire. It could also provide an opportunity to use actual situations in role plays, and could provide an excellent setting for evaluation of behavior changes by trainers.

Another important finding was confirmation of the importance of the classroom or workshop experience itself as reported by Elmes and Costello (1992). One of the reasons for Department C attending the class as a group was a perception by management that communication had broken down in that department and that it was affecting work. Many participants reported that one of the primary benefits of the class was simply having a safe place to discuss problems and to work out communication problems with coworkers and supervisors without fear of retribution. In this case, the trainers acted as facilitators to allow the problems to surface and be discussed. As Elmes and Costello (1992) note, "Effective communication skills training begins when people are encouraged and given the opportunity to relate to one another in meaningful ways. It begins when people have a chance to explore and ask questions about relationships and their contextual influences" (p. 443). Several participants commented that it would be good to do that again and to incorporate the new people in the department, a suggestion that may be worth pursuing.

Finally, this study demonstrated that it is possible to gather meaningful evaluation data without the use of surveys and quantitative methods. While the results cannot be quantified into bottom-line figures for the organization, they do provide an indication that participants consider the training beneficial and useful in many ways. The results have good internal validity in that they were collected across three departments having very different responsibilities, and given the uniformity of results, one could anticipate good intra-organization validity. External validity beyond this organization is problematical, although it is possible that the results may be generalizable to similar organizations using the same program and trainers. This will be confirmed during continuation of this study in several of those organizations using the training in the future.

Strengths and Limitations of Current Study

Some of the strengths and limitations of the current study have been addressed above. Confirmation and extension of the current literature is obviously one of the strengths, as is the demonstration of connecting evaluation levels three and four in a single study. The implications drawn for training design and delivery should provide important benefit for trainers and training designers. Finally, confirmation that communication is perceived to be useful by participants should help to convince management of the benefits of continuing to provide this training.

Obvious limitations are the lack of generalizable methods for evaluation as called for by Stevens and Hellweg (1990) and the lack of development of baseline data called for by Corder (1988). The external validity or generalizability of the results may be a limitation, but this will be explored in future research in this

organization and others using the same training program. Finally, the study limited itself to self-report data from participants only, with the exception of one supervisor, and it could benefit from triangulation of observations by coworkers and other supervisors. While there was some confirmation of data by cross-report by participants, it was limited and informal. This should be remedied in the continuing studies planned in the future.

Conclusions

This study found that, in this organization, participants in formal communication training perceive behavioral changes which they attribute to the training, and these behavioral changes persist over time. Further, these participants report positive results from the use of the changed behaviors, thus establishing a perceived positive effect due to the communication training program. This suggests that the decision to use communication training in this organization was worthwhile, especially for those employees who participated. Given the uniformity of responses across the three departments examined, one could expect good intra-organizational validity for this training, meaning that a decision to continue the training could be expected to produce similar favorable results in other departments. Given that similar organizations exist in other cities, it is possible that the training results may generalize to these other organizations, but this study did not address that issue.

The study also demonstrated that it is possible to perform useful evaluations of levels other than reaction and learning even in the absence of baseline performance data and without using extensive quantitative methods. In fact, the

psychological perspective and the personal interviews yielded results which might not have been obtainable with a general survey. The implications for training design and delivery would not have appeared with a survey which simply examined outcome variables, lending credence to Goldstein's (1993) observation concerning the potential error of not including process variables in evaluation. It is also unlikely that the rich supply of anecdotal evidence would have appeared using a general survey.

While the results do not provide the standardization called for by Stevens and Hellweg (1990), they do provide evidence of the value of evaluating communication training programs at the behavior and results levels. This is a valuable addition to the current literature, which contains few published reports of evaluations combining these levels. Continued research along these lines should continue to provide valuable data for researchers in organizational communication, who must address these issues to stay abreast of current trends in rapidly changing organizations.

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RESEARCH SUMMARY OF WRITE STUFF EVALUATIONS

INTRODUCTION

In 1992, Drs. Stephen A. Bernhardt and Paul Meyer were awarded a National Workplace Literacy Grant from the U.S. Department of Education. This grant provided funding over an 18-month period for the purpose of offering tutoring and short courses to hospital employees through New Mexico. The title of the project was *Step Ahead*. The objective of this grant was to help front-line employees improve their communication skills and provide them with the skills and opportunity to work toward advancement within their workplace.

Write Stuff is a 16-hour writing course offered by the *Step Ahead* project to hospital personnel. The sessions are generally taught over a four-hour period, two days a week for two weeks. During this period, teachers work with the students to familiarize them with some of the following concepts in writing: the communication triangle; relationships between writer/subject, writer/reader, and reader/subject; audience; purpose; writing as a process; consideration of the visual appearance of written materials; and different ways to think about planning and drafting, e.g., brainstorming, key words, clustering, and peer reviews. Because of the short amount of time that the course is offered, there is little opportunity for discussion of grammar, format, and spelling.

SUMMARY

At the beginning of the course, we ask students what they believe is good and bad writing and follow this with some discussion. Then we give them a pre-test which is usually a handout that describes a potential safety hazard and

includes information about the person in charge and some specific examples of potential hazards for employees, visitors, or patients. We give the students about 20 minutes to write a memo to the responsible person which addresses the concerns mentioned in the prompt. We inform students that these memos will not be graded, but will be used to help us determine whether we have been successful in improving their writing skills when papers are reviewed at the end of the course. We also return copies of these pretests to the students toward the end of the course to discuss what changes, if any, they might make if they rewrote the memo.

After we collect the pretests, we talk about the format of a memo and how it should appear—it should include the date and the words 'MEMO' or 'MEMORANDUM,' 'TO,' 'FROM,' and 'SUBJECT.' This is the only discussion we have concerning format. Next, we begin discussion of the concepts included in the course. We begin with the communication triangle and the various relationships involved from that triangle. Homework assignments consist of writing memos that address changes in hospital policy, workplace procedures, requests for tuition reimbursement, and a final assignment that requires students to write a self-evaluation they can actually use during their own performance appraisals.

The last assignment is something we work toward and talk about during the two weeks that the course is taught. It requires students to think critically about themselves and the working relationships they have with their supervisors. This exercise also requires them to plan how they might present themselves in writing by evaluating and discussing their skills. Visual representation on paper, as well as how they will present themselves and their skills, are part of the employees' considerations when writing these evaluations to their supervisors.

Students perform peer evaluations of their assignments during class. In addition, teachers review and provide comments and guidance for students on their papers. We then discuss the papers and what worked and did not work for them during their writing process.

During the last class session, we review and work on the self-evaluation, which by this time they have begun to take quite seriously. At the end of the class, we give the students a post-test which is similar to the pre-test and addresses a quality issue. A problem exists in the way that cleaning compounds are labeled on their floor. Specific examples are then given and the students are told who should receive the memo. Again, we give them about twenty minutes to address the problem and complete the memo.

Because they practice and do peer reviews in class, we expected that their writing might show improvement at the end of the 16 hours. This study compared a pre- and post-test writing sample to determine whether there was any improvement in the writing of these students.

METHODOLOGY

For this study, we collected twenty-one pre- and post-tests (for a total of forty-two samples). We had the tests typed for ease of reading, but left the texts just as they had been written with grammatical and spelling errors included. Next, we asked two students in the doctoral program who had not taught the class before to serve as reviewers. We used five unmatched tests as practice samples. Our scoring rubric (Attachment 1) had five categories: clear purpose, writing for audience, development, clear expression, and action close. We asked our reviewers to score each of these categories on a score sheet (Attachment 2) with a scale from 1 to 3—a score of 1 representing a weak paper and a score of 3 representing a strong paper. The reviewers looked at the scoring rubric and

practiced with the five unmatched tests. Then we discussed their scores with the reviewers to ensure that each reviewer had the same understanding of the categories they were rating. When everyone felt comfortable with the review process and the scoring method, we gave the reviewers the forty-two samples to score independently of each other. The samples were coded and distributed so that no pre- and post-tests were scored together. For example, the pre- and post-tests for the person coded 1216 were not graded consecutively (that person's pre- and post-tests together), nor were all pre-tests or post-tests lumped together. Samples were coded so that we would know which ones were pre-tests and which were post-tests for our reporting purposes.

RESULTS

Using the SAS program, a t-test was run for each of the categories in the scoring rubric. Differences between pre- and post-tests were not significant for any of the categories scored. We recognized that for several of the matched pairs, the post-test had been a writing assignment much different than the pre-test. We eliminated these four sets from the data and again ran the t-tests. There were still no significant differences between pre- and post-tests.

Frequencies of scoring totals were calculated and a correlation analysis was also run to attempt to approximate at reader reliability. We did not have a software program available that would run an interrater reliability test, so we chose to use the correlation analysis available to us on SAS. The analysis showed the correlation of our reviewers with one another for each category in the rubric. Correlation was especially high in purpose (0.562) and development (0.476), and showed greater variation in the action close (0.214). Looking at scores of 6 (3+3 only) and 2 (1+1 only) versus scores of 3 (1+2 only) and 5 (2+3 only), we can see if our correlations make intuitive sense. For purpose, there were 18 scores of 2 or 6

but only ten of 3 or 5, suggesting good correlation. For development, there were 14 scores of 2 or 6, with only 7 of 3 or 5. On the other hand, action close had no scores of 2 and only 5 scores of 6, while there were 23 scores of 3 or 5, suggesting greater discrepancy and thus lower correlation. Using correlations thus makes intuitive sense as an approximation of reader reliability.

DISCUSSION

These tests showed us that there were no statistically significant differences in the writing between the pre-test and post-tests administered to our students in the 16-hour workshop. There are several possible reasons for this.

These students spent only 16 hours (not including homework time) learning to do writing in a different way than they had done previously. They also learned new skills which they were required to practice. When they were given a post-test, they may have been attempting to apply these new skills, which made their new attempts at writing a different process that resulted in a higher occurrence of scores in the weak category. An example of this was one student who tried to brainstorm and cluster his work before he wrote his memo. This slowed him down enough that he only completed the first two sentences in his post-test memo. This could be much like teaching a foreign student to speak English in a short time (or an English speaking student to speak a foreign language). When the first attempts with the new skill are used, they appear awkward. Unless the skill is put to use right away and performed frequently, improvement is not going to be indicated, and it may not be well enough established by the end of a 16-hour class to show improvement.

This may mean that the way to determine learning in the class is to test on content rather than practice. In other words, test to see if students remember the skills they were taught, not whether they can use them. A previous study using

scripted interviews conducted at some time after the class demonstrated that students could recall the skills taught, but did not evaluate their use of the skills. Actual use of the skills may have to be evaluated through a longitudinal evaluation conducted at several times after the student has had time to assimilate and use the skill.

Also, our sample consisted of only 21 students. A much larger sample would be needed to establish validity for this study. In addition, our rating was on a scale of 1-3. Perhaps if we had used a scale from 1-5, our reviewers would have been able to choose a rating that provided a choice with more discrimination from weak or strong. These considerations are important for any follow-up efforts to determine effectiveness of the Write Stuff course.

CONCLUSIONS

These results suggest that pre- and post-tests are probably not an effective means by which to determine improvement in writing, especially when the class time is as short as our 16-hour course. Further research is needed to determine whether students actually do learn skills that will help them in their workplace. Such research should involve a longitudinal study that would ensure that a transfer environment exists where students can apply the skills they are taught in the classroom to the workplace. A follow-up study should look at their writing after a one-month, three-month, and six-month period to determine if improvement is occurring and at what rate. Follow-up workshops can be given for students who may be having certain difficulties or for students who are writing well enough to advance to higher levels (such as writing summaries and longer, more comprehensive reports).

Write Stuff Evaluation of Pre- and Posttests

Overview

Analysis of pre- and posttests collected from Write Stuff classes revealed no significant differences between pre- and posttest groups.

Procedure

Twenty-one matched pairs of pre- and posttest writing samples from Write Stuff classes were collected and typed onto sheets of paper, preserving the format and errors of the test memos but eliminating handwriting as a variable. Each of the memos was rated twice by two raters trained to use the scoring rubric shown on the following page. Raters assigned each memo a score of from 1 (weak) to 3 (strong) on the five variables: purpose, audience, development, expression, and close.

Results

Means, standard deviations, and the results of a t-test comparing pre- and posttests are presented below. There were no significant differences between pre- and posttest scores, but pretest scores tended to be a little higher than posttest scores.

Variable	N	Mean	Std. Dev.	Result
Purpose				
Pretest	21	4.67	1.39	not significant
Posttest	21	4.52	1.40	
Audience				
Pretest	21	4.61	1.20	not significant
Posttest	21	4.33	1.42	
Development				
Pretest	21	4.62	1.20	not significant
Posttest	21	4.62	1.16	
Expression				
Pretest	21	4.05	1.24	not significant
Posttest	21	3.81	1.33	
Action Close				
Pretest	21	4.62	1.20	not significant
Posttest	21	4.14	1.06	
Total Score				
Pretest	21	22.6	5.04	not significant
Posttest	21	21.4	5.49	

Memo Scoring Rubric

For each of the following 5 categories, rate the essays from 1 (weak) to 3 (strong). A description of the categories and what ratings mean is provided below.

Category	1 (weak)	2	3 (strong)
Clear Purpose	Purpose of the memo is not clear.	Purpose of memo can be inferred. But the reader is not completely sure what the writer wants.	Purpose of the memo is clear.
Writing for Audience	Memo has elements of content or tone that seem inappropriate for the given audience.	Memo is generally appropriate for the given audience. A few minor elements may seem inappropriate.	Memo seems right on target for the given audience. Tone, content, and approach all seem appropriate.
Development	The memo does not provide sufficient detail about the problem. The reader has several unanswered questions about the problem.	The memo generally provides enough detail about the problem, but leaves the reader with a question unanswered.	The memo contains sufficient detail to answer all relevant reader questions.
Clear Expression	The memo is difficult to understand on a sentence-to-sentence basis.	The memo is generally clear, though some of the wording could be improved.	The memo is clear and easy to understand.
Action Close	The memo does not request the reader to do anything.	The memo implies that the reader should handle the problem, but does not make a clear request.	The memo ends (or begins) with an explicit request for reader action that will address the problem.

Communication for Supervisors Follow-Up Evaluation Survey

Discussion of Results

The attached pages present the numerical results from the follow-up survey of participants in the Communication for Supervisors courses taught at Presbyterian Hospital in Albuquerque. This section will discuss and interpret some of those results.

Population and Sample Size

Over eighty people participated in the Communication for Supervisors course at various sites in New Mexico. By far, the largest number of participants was from Presbyterian Hospital in Albuquerque. Forty-eight questionnaires were distributed and twenty-four were returned. Two of these were deemed unusable, leaving a sample of twenty-two for whom results are reported here.

General Observations

In general, the responses to the survey reflected very positive feelings about the benefits of the course, even after periods of time from six months to over one year later. As means show, most responses were above 4, reflecting a fairly high rating for most topics. Items have been rearranged to reflect the ranking by mean response, although the differences among most responses are obviously very small. There was only one item that received a mean response of 4.50 or higher, and there were only two that received mean responses lower than 3.50, suggesting a consensus of participants about the course.

Quality and Relevance of Course

The top items in both questions 6 and 7 were class discussion/examples/feedback and instructor/instructor feedback/instructor examples. These results suggest that the classroom experience itself was a valuable part of the workshop and perhaps overshadowed some of the specific material from the course. This is also reflected in the written response of one participant who noted the opportunity to become aware of situations and problems in other areas of the organization. An evaluation of the Straight Talk course, included in this final report, found much the same thing, reflecting the idea that the opportunity to communicate with others in the same department or in different departments outside of a work environment is a key part of opening up communication in any organization. It also suggests that examples in the book and "canned" role plays may be less valuable than using class problems as examples and as the basis of role plays. This demands great flexibility from the instructors, but may prove much more valuable for the participants. The fact that networking opportunities received a relatively low rating may reflect the

fact that there was little opportunity to actively network with others in the class, and this needed to occur informally if it happened at all. It may be valuable to add time to the course for participants to get to know each other and to establish contacts in other areas of the organization.

Effects on Communication

Participants felt that communication had improved "somewhat" to "greatly" with employees, subordinates, bosses, supervisors, coworkers, and colleagues. They were only slightly less positive about improved communication with family and friends, perhaps reflecting the fact that Communication for Supervisors concentrates on work relationships and not as much on interpersonal communication in general. This contrasts with the results from the Straight Talk evaluation referred to earlier that found many participants reporting improved communication in personal relationships.

Effects on Personal Growth and Abilities

Participants reported good improvement in self-esteem and self-confidence, as well as in their abilities to handle problems, handle criticism, and understand others. The improvements in self-esteem and self-confidence likely reflect their perceptions that they are better able to handle problems and deal with people concerning problems and criticism. They reported slightly less improvement in areas of using time, dealing with emotions, praising, reprimanding, and doing performance appraisals. No participants reported having the course affect them in a negative way.

Value and Usefulness of Specific Topics

Active listening was clearly the top item in value for participants, followed by the items mentioned as improved in the previous question: problem solving and handling criticism. Other items with a high value for participants all dealt with interpersonal communication: handling problem people, confronting, "I" language, open questions, and praising. It is somewhat surprising that paraphrasing, which is taught as a component of active listening, and reprimanding both fell lower on the list, but they are still reported as having value for participants. Paraphrasing can often sound phony or artificial to people who are not confident in using the technique, and this may explain its lower ranking. Reprimanding is difficult and often uncomfortable, and this may explain its lower ranking. A possible solution for these would be to place more emphasis on them and allow more time for practice in class.

Frequency of Use of Skills Taught

With some reordering of rank, the top items for frequency of use are the same as the top items for value in the previous question. The one exception is the

appearance of communication styles near the top, perhaps reflecting an awareness of the differences between individuals that affect communication. Active listening is no longer the top item, but a possible explanation is that people may be using this skill without being aware of it, leading to reporting it as used less frequently than it is. Paraphrasing and reprimanding are again near the bottom of the list, and the top items continue to reflect the importance of the interpersonal types of communication.

Instructor Effectiveness

Instructors received good marks for maintaining schedules, staying on track, and covering the material. They were deemed less effective in actual presentational and facilitation skills such as leading discussions and answering questions, and it is not clear why this occurs. Some instructors may have been less familiar with the material or not have had sufficient supervisory experience to address class concerns, and instructors for this class needed to establish credibility with the class. Another explanation may be that the mechanical aspects of staying on track were second nature to instructors, earning them high marks, and the lower ranking for the other items simply reflected the less mechanical aspects of those items and not criticism.

Support for Efforts in Using Skills

Supervisors received high marks for their support of employees trying to use these skills, as did Step Ahead coordinators. Upper management also received good marks, but coworkers, other supervisors, employees, and subordinates received noticeably lower marks. This likely reflects good commitment from management for these courses, but some uncertainty from those at an equal or lower level as to what the participant may have learned or what the effects may be from the course. This suggests that additional effort may be necessary to reduce uncertainty or resentment on the part of coworkers or employees as to what the effects the course may have for them.

Possible Improvements

Surprisingly, even though supervisors were given high marks for their support in the previous question, more support from supervisors was ranked as the top item in what would help participants to use the skills they have learned. More support from coworkers and other supervisors was ranked equally high, but this is not surprising given its low ranking in the previous question. An explanation for this result is not readily apparent, and further questioning of participants may be necessary to allow understanding of what is meant. A follow-up review session after three months gained some support, and this has been considered. Other items were deemed less valuable.

Summary and Conclusions

The most obvious conclusion is that, even after a significant period of time, participants still felt that this course was beneficial for many reasons, and they reported that communication improved in many areas. They also reported that the classroom experience itself was a major benefit, probably because it allowed them to see and understand that their problems were not unique but occurred in many other areas of the organization. The most valuable and most-used skills from the course concerned the interpersonal aspects of supervisory communication, reflecting an understanding that this is a critical part of effective supervision and that few people feel adequate in many of these skills. The increased self-esteem and self-confidence reported by participants suggests that they felt more comfortable with their skills and abilities after the course. This may suggest that the course needs to emphasize these skills and spend less time on the items such as performance appraisals, meetings, goal setting, reading, and writing, items that deal more with supervision and less with communication. Finally, even though supervisors and management supported employees in their efforts, even more support from supervisors and especially from coworkers and subordinates would be beneficial. This may involve more open communication concerning just what the course is about and what results might be expected, thereby reducing uncertainty and the inevitable fear of change it engenders.

Communication for Supervisors Follow-Up Evaluation Survey

1. Department or work area _____

2. How long ago did you take Communication for Supervisors?

1 within last 3 months? 3-6 months ago?
10 6 months to a year ago? 11 over 1 year ago?

3. What was the course schedule or format?

11 Two full days - 1 or more weeks apart?
5 Two consecutive full days?
3 Four half days?
 Other? (Describe)

4. Did you attend all sessions? Yes 18 No 3

5. If no, about how much did you miss?

2 less than 2 hours 2-4 hours
 4-8 hours 1 more than 8 hours

6. How would you rate the overall quality of the following items?

	Excellent	Good	Average	Below Average	Poor	Mean
Class discussion	5	4	3	2	1	4.32
Instructor(s)	5	4	3	2	1	4.22
Overall course	5	4	3	2	1	4.19
Other participants	5	4	3	2	1	4.09
Course book/handouts	5	4	3	2	1	4.05
Schedule/ format	5	4	3	2	1	3.95
Networking opportunities	5	4	3	2	1	3.77
Facilities	5	4	3	2	1	3.72

7. How relevant to your job/work environment were the following parts of the workshop?

	Very Relevant	Somewhat Relevant	Average Relevant	Minimal Relevant	Not Relevant	Mean
Class discussion/examples	5	4	3	2	1	4.33
Class feedback	5	4	3	2	1	4.19
Instructor feedback	5	4	3	2	1	4.14
Instructor examples	5	4	3	2	1	4.10
Role plays	5	4	3	2	1	4.04
Examples in book	5	4	3	2	1	3.81

8. How do you feel the course has affected your communication in the following areas?

	Greatly Improved	Somewhat Improved	No Change	Somewhat Worse	Much Worse	Mean
With employees/subordinates	5	4	3	2	1	4.33
With boss/supervisor	5	4	3	2	1	4.29
With co-workers or colleagues	5	4	3	2	1	4.29
With family/friends	5	4	3	2	1	4.04

9. How do you feel the course affected you in the following areas?

	Greatly Improved	Somewhat Improved	No Change	Somewhat Worse	Much Worse	Mean
Self-esteem	5	4	3	2	1	4.35
Self-confidence	5	4	3	2	1	4.30
Handling problems	5	4	3	2	1	4.29
Handling criticism	5	4	3	2	1	4.24
Understanding others	5	4	3	2	1	4.24
Use of time	5	4	3	2	1	4.15
Dealing with emotions	5	4	3	2	1	4.15
Praising	5	4	3	2	1	4.10
Reprimanding	5	4	3	2	1	4.00
Doing performance appraisals	5	4	3	2	1	3.90

10. How valuable/useful did you find each of the following topics from the workshop?

	Very Valuable	Somewhat Valuable	Average Value	Minimal Value	Useless	Don't Remember	Mean
Active listening	5	4	3	2	1	0	4.37
Problem solving	5	4	3	2	1	0	4.25
Handling criticism	5	4	3	2	1	0	4.21
Handling problem people	5	4	3	2	1	0	4.21
Confronting	5	4	3	2	1	0	4.15
"I" language	5	4	3	2	1	0	4.11
Open questions	5	4	3	2	1	0	4.11
Praising	5	4	3	2	1	0	4.11
Writing tips	5	4	3	2	1	0	4.05
Communication/ work styles	5	4	3	2	1	0	4.00
Paraphrasing	5	4	3	2	1	0	3.94
Active reading	5	4	3	2	1	0	3.89
Meeting tips	5	4	3	2	1	0	3.89
Reprimanding	5	4	3	2	1	0	3.88
Goal setting	5	4	3	2	1	0	3.85
Performance Appraisal tips	5	4	3	2	1	0	3.83

11. How often do you use the following skills or information from the workshop?

	Always	Often	Sometimes	Rarely	Never	Unsure	Mean
Problem solving	5	4	3	2	1	0	4.28
Confronting	5	4	3	2	1	0	4.28
Communication/ work styles	5	4	3	2	1	0	4.17
Active listening	5	4	3	2	1	0	4.16
"I" language	5	4	3	2	1	0	4.00
Open questions	5	4	3	2	1	0	4.00
Handling criticism	5	4	3	2	1	0	4.00
Handling problem people	5	4	3	2	1	0	4.00
Goal setting	5	4	3	2	1	0	3.89
Praising	5	4	3	2	1	0	3.89
Writing tips	5	4	3	2	1	0	3.73
Performance Appraisal tips	5	4	3	2	1	0	3.65
Paraphrasing	5	4	3	2	1	0	3.63
Active reading	5	4	3	2	1	0	3.61
Meeting tips	5	4	3	2	1	0	3.61
Reprimanding	5	4	3	2	1	0	3.47

12. How effective was (were) the instructor(s) in the following areas?

	Very Effective	Effective	Somewhat Effective	Not very Effective	Ineffective	Don't Remember	Mean
Maintaining schedule	5	4	3	2	1	0	4.42
Giving breaks	5	4	3	2	1	0	4.33
Covering material	5	4	3	2	1	0	4.33
Staying on track	5	4	3	2	1	0	4.32
Dealing with problem people in class	5	4	3	2	1	0	4.31
Maintaining interest	5	4	3	2	1	0	4.26
Leading discussion	5	4	3	2	1	0	4.17
Presenting material	5	4	3	2	1	0	4.16
Facilitating class participation	5	4	3	2	1	0	4.16
Answering Questions	5	4	3	2	1	0	4.11
Addressing class needs/problems	5	4	3	2	1	0	4.11

13. How supportive were the following people in your efforts to use the skills you learned?

	Very Supportive	Somewhat Supportive	Neither	Somewhat Resistant	Very Resistant	Mean
Your supervisor	5	4	3	2	1	4.50
Step Ahead						
Coordinators	5	4	3	2	1	4.41
Upper management	5	4	3	2	1	4.17
Co-workers/other supervisors	5	4	3	2	1	3.94
Employees/subordinates	5	4	3	2	1	3.94

14. How valuable do you feel each of the following items would be for helping you to use the skills from Communication for Supervisors?

	Very Valuable	Somewhat Valuable	Average Value	Minimal Value	No Value	Mean
More support from supervisor	5	4	3	2	1	4.47
More support from co-workers/other supervisors	5	4	3	2	1	4.47
Follow-Up/review session after 3 months	5	4	3	2	1	4.12
Opportunity to discuss problems with instructors by phone	5	4	3	2	1	3.94
Follow-Up/review After 6 months	5	4	3	2	1	3.88
Follow-Up/review After 1 year	5	4	3	2	1	3.17

15. Do you have any additional comments or suggestions about Communication for Supervisors? Please make any additional comments here or on the backs of the sheets.

Summaries of comments

- (1) Much information reinforced prior learning. Networking opportunities were valuable, especially the chance to learn about situations in other areas of the organization. Related an instance of a coworker in the same workshop who used some of the techniques to successfully resolve a conflict.
- (2) Wanted us to offer employees communication for employees to help understand where supervisors are coming from.
- (3) All management should attend, including upper management.
- (4) It helped even though not a supervisor, to be able to better communicate with coworkers and to be more self assured now that classes for certification are going on.
- (5) Felt opportunity to discuss problems with instructors by phone (Question 14) would be very valuable because of confidentiality and opportunity to discuss with someone outside the organization.
- (6) Took class over a year ago and was uncertain about validity of responses. Would have liked survey sooner.

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THANK YOU FOR YOUR TIME

April 8, 1994

Step-Ahead Evaluation

Mimbres Memorial Hospital

Deming, New Mexico

It is important for me to start by saying the learners in this program still want confidentiality, and reluctantly allowed me to use their names, after I assured them they would not be published. We have our learners numbered and only the tutor and I, besides the learning group, know their names. In the hispanic community it is important for them to "save face" and their peers have a tendency to tease them for learning another language, so it is not talked about until they can speak comfortably.

In order to conduct this survey, I first went to their classes, introduced the evaluation forms, and explained what we were doing and why. Then I left the forms with the tutors, they talked about them in class and asked them to take them home to think about their answers. Then they came back to class, but all agreed they didn't understand, so when I interviewed, I brought along one of my tutors who is bi-lingual to be sure we understood each other. This made them feel more at ease to know they didn't have to struggle with the language. While I was interviewing I tried to touch on as many areas as I could to get a total feel of how the program has been received, and found almost 100% positive attitudes. The group which has been with Yvonne T. gave me a great feeling of satisfaction. In December Yvonne told me she felt some changes needed to be made, and when she casually brought it up to the group, they all told her they would quit if they were given a new tutor. However, in February when I introduced myself as their tutor, they all had a positive attitude towards the change and all levels are working with no problems at this time.

Two learners have moved on to SED preparation, and one who had dropped out of terminology is now working with that group and wants to continue with terminology, also.

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Mimbres Memorial Hospital, can't

One learner received her citizenship this summer and voted for the first time in the local elections this fall.

We have been able to match a male learner who was waiting for a male tutor. One other learner joined the group but was too far advanced and is now waiting for another tutor. We have a need for a beginner ESL class again and are working towards setting this up before the end of the fiscal year.

It is my opinion that we need a strong and dedicated person from within the facility to make the tutor-learner matches work with hospital personnel. I have discussed this at length with Yvonne and she has approached the administration and they have agreed to have me go speak at a supervisor meeting to explain the program and our needs. Both she and Linda have been a tremendous asset to the literacy program. LeeAnn and Ann have helped us a great deal, and we have all learned together. It has been a great experience, and I hope that the Step-Ahead program can grow to other areas in the community. One of the most difficult things to accomplish is to convince the management of the great need for Literacy in this area.

Even though the Step-Ahead grant has come to an end, the program will continue to grow at Mimbres Memorial Hospital.

Respectfully submitted,

Roberta Thulin



Director

Deming Literacy Program LVA

Step Ahead Evaluation
Mimbres Memorial Hospital
Deming, New Mexico

Nov. 1992- March 1994

Tutors: 5 246.5 + 98 training hrs.

Learners: 10 619.0

Administrative ave. 2 hrs. per mo. 34

total program hrs. 297.5

(3) tutor training workshops

Learners: All remained or returned to program. Gained some new ones.

Tutors: One tutor transferred to regular literacy program and is now inactive. One tutor is inactive for personal reasons.

We have one waiting to be trained and start another beginner ESL class.

All learners have advanced regularly and are working towards their individual goals.

Accomplishments: (1) citizenship (2) job promotions
(2) working towards NA training
(2) from ESL to GED prep.

All interviews were positive for the Step-Ahead program.

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February 18, 1994

To Whom It May Concern:

Since December, 1992, I have been a tutor through the American Literacy Program, and, more specifically, through the Step Ahead Program, which is directed at our non-English-speaking employees at Mimbres Memorial Hospital.

Originally we met twice a week for one hour each session, but decided to meet once a week for two hours since one hour at a time did not give us the opportunity to adequately address our specific lesson. I started with four learners, increased to six, and then "graduated" two of the six to another level of instruction, leaving me once again with four learners. I personally find three to four to be the best number of students for one tutor, allowing sufficient time to be spent with each student individually.

Since beginning classes in 1992, one of the students has passed her citizenship test and is now a very proud U.S. Citizen. Another has been promoted from dishwasher in the dietary department to being on the tray line, which involves reading the patient diet cards and filling the trays accordingly. Two other learners have taken a portion of the nursing assistant course, and will be starting the course again in May, 1994, which, if passed, will move them from their present positions in the Housekeeping department.

Each milestone is not only personally rewarding to the student, but gives me a marvelous sense of satisfaction, and we all rejoice together.

I have recently passed my four students who are at level three-four, on to a new tutor who will be able to provide some new insight to these ladies. I have now undertaken a class with three GED-level students who are not all specifically interested in GED education, but in improving their fluency in the English language.

I personally feel a sense of fulfillment from helping these wonderful students in this small way. As I tell everyone who asks: "This is something I do for me!"

Thank you for the opportunity, not only to teach, but also to learn.

Evelyn E. Todd

Nov. 1943

I started tutoring two Mexican
middle age men twice a week
at the hospital library

One hour sessions at the
end of their work day

One knows a little more English
than the other and sometimes
interprets for me

I read at my book table
Spanish Novels - Simple

Progress is slow but
and one of the other is
doing better than the other

Progress

Progress

SUMMARY TUTOR EVALUATIONS

1. Do you have a productive tutoring relationship with your learner?

YES: 5 NO: 14

FOR THOSE WHO SAY YES:

2. If yes, are you still tutoring?

REGULARLY: 4 OCCASIONALLY: 1

3. Do you feel you were well trained?

YES: 3 NO: 1 AMBIVALENT: 1

4. How frequently do you meet?

- Once a week
- As needed
- When possible
- Once every other week
- Twice a week

5. Were you able to see gains in your learning?

YES: 5 NO: 0

6. Are you able to identify any special accomplishments of your learner?

Received GED: 1

Now wants GED: 1

Literacy Improvement: 3

Math Skills: 1

Self Confidence: 3

Writing: 1

Spelling: 1

TVI: 3

7. Do you feel well supported as a tutor?

YES: 1

NO: 1

AMBIVALENT: 3

8. What additional support would you like?

- Tutor support meetings
- Nothing
- Nothing
- Problem solving meetings at lunchtime
- Materials and more support meetings

9. What satisfactions have you found in tutoring?

- Watching student learn
- Friendship
- Being able to help

- o Having impact
- o Observing their growth and receiving their gratitude

10. What frustrations have you experienced with tutoring?

- o Meeting times
- o None
- o None
- o Not prepared in training for advanced
- o Fear of inadequacy

11. If you are not still tutoring, would you like to be rematched?

YES: 1

NO: 0

AMBIVALENT: 4

12. What advice to you have for:

- A. Step Ahead:**
- None
 - More marketing; recruit lower lit. levels
 - None
 - Workshop for tutors with advanced learners
 - More advertising and encouragement
- B. PHS:**
- Be clear about pay arrangement
 - Need literacy library
 - None
 - Needs coordination
 - Support employees
- C. Tutor trainers:**
- Better description of agencies involved
 - Condence trainings to two days
 - None
 - Lunch time trainings
 - Trainers with real tutoring background
- D. NMCL:**
- Don't know them
 - None
 - None
 - None
 - Higher profile
- E. ALP:**
- Follow up; more support; more visibility
 - No contact; no advice
 - None
 - None; they're cooperative
 - More responsive

FOR THOSE WHO SAY NO:

2. If not, why not?

- Stopped for holidays; lost interest.
- Commitment difficult but met goals.
- Domestic violence in learner's home.
- Work obligation changes,
- Hospital not flexible when job changed.
- Learner moved.
- Learner's family conflicts.
- Never met; never reassigned.
- Moved; couldn't keep up.
- Students all left; couldn't commit.
- Not able to coordinate schedules.
- Learner had family problems.
- Small group; learners dropped out.
- Out of ideas; L.D. learner; job pressures.

3. Would you like to be rematched?

- Yes, even with same person.
- No.
- Yes, in process now.
- No.
- No, still "on call" with old student.
- Eventually.
- Yes, if time problem is resolved.
- Yes.
- Maybe.
- Yes.
- No.
- Not now.
- Maybe.
- Maybe; not likely.

4. Did you gain anything from the experience?

- Self confidence, esteem. Felt good.
- Increased awareness; excellent experience.
- Fulfillment; learners were eager, willing.
- Ability to impact a life; friendship.
- Enjoyed learner's successes resulting from lessons.
- Enjoyed it.
- Feel ownership of a wonderful skill; different perspective.
- Training was helpful in her own job.
- Enjoyed watching learner.
- Learned to assess skills and needs; organized self.
- No.
- Enjoy teaching adults; friendship.
- Used materials with own child; insight into teaching.
- Could give something meaningful; insight.

5. Do you have suggestions for creating a successful

employee-to-employee tutoring program?

- None; everything was available.
- Specify time commitment to tutors; more support meetings.
- None.
- Have up-front work systems in place; substitutes for workers when they are being tutored or are tutoring.
- More flexibility on the part of employers.
- Totally volunteer; no time-keeping records.
- Not really; worked well.
- Facilitate first meeting; can't leave post for two hours.
- Need goals; training too simple; more detailed screening.
- Lack of confidentiality between co-workers.
- Better structured training; more support from Pres.
- Line workers should be tutoring, not just management.
- None.
- None.

(Interviewer opted to ask about training even though it was not included as a question for those who said no.)

Do you feel you were well trained?

YES: 12

NO: 1

AMBIVALENT: 1

SUMMARY LEARNER EVALUATIONS

1. Do you have a productive tutoring relationship with your tutor?

FOR THOSE WHO SAY YES:

2. If yes, are you still in a tutoring relationship?

REGULARLY: 3

OCCASIONALLY: 0

3. How frequently do you meet?

- Once a week.
- Twice a week.
- Twice a week.

How many total hours would you estimate you have spent with your tutor?

- At least 100.
- Not sure.
- Not sure; about 16 months, twice a week.

4. Are you able to see gains in your learning?

- Yes, have learned how to learn; am motivated.
- English improved; work is easier.
- Reading and math improved; got GED.

5. Can you identify any special accomplishments that are due to your tutoring?

- About to pass GED.
- Work is better; can understand what people say now.
- Can help sons with homework; can write better; got GED.

6. Do you feel well supported as a learner? Do you know where to get the advice or learning materials you need?

- Yes, tutors and ALP; most of all, Sylvia.
- Yes, from tutor.
- Yes, can study at work and see tutor; management very understanding and cooperative.

7. What additional support would you like?

- More tutoring.
- Everything's fine but too much work at job.
- Help to find and pay for babysitter.

8. What satisfactions have you found in your tutoring relationship?

- Tutor comfortable, understanding and won't let her give

up.

- Friendship.
- Generosity of tutor; feel very lucky.

9. What frustrations have you experienced with tutoring?

- None.
- English is difficult; many words & concepts.
- English spelling is very hard.

10. If you are still receiving tutoring, would you like to be rematched?

YES: 0 NO: 1 *AMBIVALENT: 2

*Had difficulty helping learners understand question.

11. What advice do you have for:

- | | |
|----------------|---|
| A. Step Ahead? | <ul style="list-style-type: none"> ● Open a computer class. ● None ● None |
| B. PHS? | <ul style="list-style-type: none"> ● Computer time at work. ● None ● Doing fine. |
| C. ALP? | <ul style="list-style-type: none"> ● Very helpful; no advice. ● None. ● Rematch quickly if student is dropped. |

FOR THOSE WHO SAY NO:

2. If not, why not?

- Tutor got too busy. Promised to come back.
- Tutor moved.
- Tutor left.
- None came.
- Family problems.
- Tutor moved to new worksite.
- Both too busy; going to T.V.I.

3. Would you like to be rematched?

- Not sure.
- Not sure.
- Maybe; unlikely.
- Yes; would like small group.
- Yes.
- Yes; especially for math.
- For specific help; typing.

4. Did you gain anything from the experience?

- Yes, help for twice a week for seven months.

- Not sure.
- Learned about all the resources; ALP, TVI, library.
- No answer.
- Expanded vocabulary, reading and writing.
- Met goals; improved English and math skills; ready for GED.
- Learning skills; better in conversation; ready to attend TVI. With tutor six hours a week for four months.

5. Do you have suggestions for creating a successful employee-to-employee tutoring program?

- Would like classroom or small group; student support.
- Better scheduling.
- Scheduling; hard when two students have to leave job at same time.
- None
- None
- End the stigma for more students. Give GED pre-test right away for goal setting, otherwise learner doesn't know what he needs.
- Too tired when scheduled late in the afternoon.

TUTORS INTERVIEWED

Aurora Bachicha
Sally Powers Urioste
Peter Snow
Deanna Rains
Ellyn Estes
Greta Zuecher
Linda Eichenberger
Mary Gutierrez
Diana Longley
Adrian Pereea

Jim O'Neal
Janet Williams
Sylvia Sandoval
Dawn Kaitfors
Elaine Armstrong
Donna Lucero
Joy Hamilton
(Anonymous)
Thomas Swanson

LEARNERS INTERVIEWED

Aurora Villanueva
Nora Marquez
Viola Trujillo
David Jaramillo
Jorge Labastida

Mickie Terrazas
Dolores Montoya
Manuela Pena
Ray Garcia
Maria Pena

STEP AHEAD
LEARNER EVALUATION

Name: _____ **Department** _____

1. Do you have a productive tutoring relationship with your tutor?

For those who say no:

2. If not, why not?
3. Would you like to be rematched?
4. Did you gain anything from the experience?
5. Do you have suggestions for creating a successful employee-to-employee tutoring program?

For those who say yes:

2. If yes, are you still in a tutoring relationship?
3. How frequently do you meet?
How many total hours would you estimate you have spent with your tutor?
4. Are you able to see gains in your learning?
5. Can you identify any special accomplishments that are due to your tutoring? (New job duties, new educational pursuits, new ways of using literacy at work, in the home, or in your community)
6. Do you feel well supported as a learner? Do you know where to get the advice or learning materials you need?

Learner Evaluation
Page 2

7. What additional support would you like?
8. What satisfactions have you found in your tutoring relationship?
9. What frustrations have you experienced with tutoring?
10. If you are not still receiving tutoring, would you like to be rematched?
11. What advice do you have for:
 - A. Step Ahead?
 - B. PHS?
 - C. the Albuquerque Literacy Project?

Name of Interviewer: _____

Date: _____

Time: _____

Location: _____

STEP AHEAD
TUTOR EVALUATION

Name: _____ **Department** _____

1. Do you have a productive tutoring relationship with your learner?

For those who say no:

2. If not, why not?
3. Would you like to be rematched?
4. Did you gain anything from the experience?
5. Do you have suggestions for creating a successful employee-to-employee tutoring program?

For those who say yes:

2. If yes, are you still in a tutoring relationship?
3. Do you feel you were well trained?
4. How frequently do you meet?
- How many total hours would you estimate you have spent with your learner?
5. Were you able to see gains in your learning?
6. Are you able to identify any special accomplishments of your learner (New job duties, new educational pursuits, new ways of using literacy at work, in the home, or in your community)?

Tutor Evaluation
Page 2

7. Do you feel well supported as a tutor? Do you know where to get the advice or instructional materials you need?
8. What additional support would you like? (Meet with other tutors, refresher course, idea sessions)
9. What satisfactions have you found in tutoring?
10. What frustrations have you experienced with tutoring?
11. If you are not still tutoring, would you like to be rematched?
11. What advice do you have for:
 - A. Step Ahead?
 - B. PHS?
 - C. Tutor trainers?
 - D. NM Coalition for Literacy?
 - E. Albuquerque Literacy Program?

Name of Interviewer: _____

Date: _____

Time: _____

Location: _____

INVENTORY STEP AHEAD MATERIALS ON HAND

11 Litstart Workbooks
43 Litstart Placement Guides
20 LVA ESLOA Answer Sheet Pads
11 ESLOA Testing Books
76 I SPEAK ENGLISH Tutor Manuals
51 LVA Basic Math Skills Tutor Handbook
03 LVA Small Group Tutoring Manual
11 Small Group Tutoring Basic Reading Handouts
32 LVA TUTOR Tutor Manual

January 19, 1994

REPORT FOR PERIOD NOV. 15, 1993 - JAN. 19, 1994
PROJECT STEP AHEAD

This period was spent researching and preparing for an extensive interview process in order to evaluate trainings, management and tutor/learner matches for Project Step Ahead.

I initially examined all files pertaining to the project which were maintained at New Mexico Coalition for Literacy offices. The titles were as follows:

COMPLETED TRAININGS - Copies of contracts to trainers along with lists of trainees, trainer reports, evaluations by trainees and an address/telephone list of participants.

UNTITLED - Blank forms: Straight Talk Pretest, Straight Talk Posttest, Straight Talk Skills Checklist and Step Ahead Course Evaluation Form.

CURRENT CONTRACTS - A cancelled Follow Up contract and letter.

MATERIALS PURCHASED - Lists of materials.

TRAVEL FORMS, ETC. - Rate schedules, correspondence to trainers, reimbursement instructions and blank forms.

MATERIALS - Handouts

CORRESPONDENCE - Two letters

STEP AHEAD GRANT - A copy of the original grant proposal.

LOVELESS SOFTWARE PROJECT - EISI catalog, relevant notes and a Silicon Heights Computers catalog.

STEP AHEAD - Second draft of Training Manual and an instructor evaluation.

Read and forwarded copies of original questionnaire draft to ALP. Minor changes were made:

Page one, tutor form, for those who say yes, after question 2, added, "Do you feel you were well trained?" as question number 3 and changed subsequent numbers accordingly.

Page two, tutor form, question number 12, listed five items as a,b,c,d,e.

Both forms, added interviewer name, date, time and location at the end of questionnaire.

The edited forms were redone as a final draft.

I arranged to meet with Sylvia Sandoval on January 19th in Albuquerque. We discussed what each of us understood as to what our activities would be and our levels of involvement in this project. I was pleased to know that Sylvia will be very active in arranging interview appointments for both of us. Our goal is to try to finish all interviews (Pres., Kaseman, Pine Tree and Loveless), by the end of February so that I can begin summaries and a final report. This seems an ambitious goal, given the numbers of individuals involved. If records are complete in the files to which I have access, there are 38 tutors from Pres and 19 from Loveless. Sylvia will find out how many learners were matched at Pres. We have set Friday, January 28th as my first interview-day in Albuquerque. We feel we will have a clear idea as to the time needed for each interview after this day. Sylvia and I plan to interview simultaneously at each site. We will meet two Wednesdays per month to share notes and observations and I will combine our questionnaires for summary after each meeting. Sylvia will interview alone during the week as needed. I have offered to interview every Thursday afternoon and evening, and all day Fridays. Sylvia felt that may not be necessary. We will each do whatever is needed to meet the deadline.

So far, I have provided Sylvia with copies of the questionnaires and copies of trainee names, addresses and phone numbers. I will forward copies of my reports to Sylvia as well, to be sure we are on the same track.

I have forwarded a copy of the questionnaires to Roberta Thulin along with a letter and some enclosures (see attached).

This completes the first report in a series of interim reports to be submitted after every 18-hour time period in the project evaluation process.

Rena Paradis
Rena Paradis
NMCL

Attachments: Inventory of materials at NMCL
Letter to Roberta Thulin
Tutor/learner questionnaires

cc: Susie Sonflieth
Sylvia Sandoval

January 29, 1994

REPORT FOR PERIOD JAN. 19, 1994 - JAN. 29, 1994
PROJECT STEP AHEAD

Have arranged with Sylvia to visit each Albuquerque site to establish an interview space and to meet those I need to know for future communication.

Planned to interview on Jan. 28 but due to weather and other circumstances, we were unable to follow through. We have, however, planned in more detail how we will arrange interviews during our telephone conversation. Sylvia has no doubt that she will fill our appointments easily.

Sylvia suggested that in situations where we are unable to meet with an individual to interview in person, she might conduct a telephone interview. This seems a reasonable alternative to no interview at all. We agree, however, that the person-to-person interview will be preferable, as nuances of body language and expression can say more than words at times.

In discussing the prospect of interviewing ESL learners, we agreed that we will be able to determine the effectiveness of tutoring by their ability to communicate in English as compared to their abilities when they first entered the program.

In visiting with contact people at different sites, I will happily consult with them as to follow-up and support, as well as how they can use other volunteers in tracking active tutors and learners.

This completes the second interim report for the evaluation project of STEP AHEAD.

Rena Paradis *Rena Paradis*
NMCL

cc: Susie Sonflieth
Sylvia Sandoval

February 9, 1994

REPORT FOR PERIOD FEB. 2, 1994 - FEB. 9, 1994
PROJECT STEP AHEAD

Solid interviews were set for February 4. On Thursday, February 3, Sylvia took me to Pres., Kaseman and the warehouse where we talked with personnel and arranged for interview rooms. All were cooperative and anxious that the project continue.

Five interviews were set for Friday, February 4: Janet Wilson, Sally Powers Urioste, Jim O'Neal and Aurora Bachicha. Dawn Kaitfors was scheduled for 11:00 AM but was unable to keep the appointment due to work schedule conflict.

The following is a summary of each interview (later to be entered in form format so as to provide a total overview of the project for final evaluation):

AURORA BACHICHA: Aurora is still seeing her learner, but their sessions are tapering off in frequency. They tend now to meet as needed. She estimates that they've met at least one hundred hours since first matched. Aurora feels that she learned how gratified she could be from helping someone and having an impact on someone's life. Her learner made great strides and was able to enroll at T.V.I. where she takes math, writing and spelling classes. She feels that she has had all the support she needs from Sylvia and other tutors; she never was involved with ALP, although she knew she could contact them if she needed to. She felt that the tutor training provided a good foundation, but there was little information to work with a more advanced learner. She would like to be re-matched someday.

- ADVICE:**
- A. Step Ahead should have done more "marketing" to lower level learners instead of just posters. She feels not as many benefited as should have.
 - B. PHS needs to keep a coordinator for the project.
 - C. Trainings should run a shorter length of time; perhaps 2 full days instead of six weeks.
 - D. Does not know about NMCL.
 - E. No contact with ALP.

JIM O'NEAL: No longer sees his learner. He felt she was seriously learning disabled and he ran out of ideas. His work became more demanding and he stopped seeing her. He did, however, work with her for seven months.

He felt he gained insight from helping her, but that she really didn't have any literacy problems. He said the time spent with her was valuable and he was able to give something meaningful, but was not prepared to work with someone who could already read. While it didn't really give him what he needed for this particular learner, he felt the training was good.

Interview ended, as he had answered all questions for those who indicated they no longer see a student. He does not want to be re-matched.

JANET WILLIAMS: Janet is still seeing her learner. She feels she was well trained but ill prepared to work with someone so advanced as her student. They still meet once every other week; she estimates having spent 100 hours with this student. Janet stated that she learned a great deal about math while working with her learner. Her student is not from the hospital. The student has much improved in reading skills and self-confidence. She has the courage now to enroll in pre-GED classes.

Janet hasn't needed support as a tutor and feels the match was great. She also said she knew she could have help if she needed it. She would have like more opportunity to meet with other tutors such as lunch-time meetings. Janet feels she is receiving much from her student, and they have a true friendship as a result of the tutoring.

- ADVICE:
- A. Step Ahead should have a workshop for tutors with more advanced students and some help with math. She suggests that Step Ahead offer orientations for supervisors to enhance cooperation.
 - B. PHS should have a "literacy library."
 - C. Tutor trainings might be better if done at lunch time. She observed that everyone was very tired.
 - D. (see item C)
 - E. Janet called ALP for reading materials. She is reporting her hours to them, although may not have reported all hours. She stated that ALP has been cooperative.

SALLY POWERS URIOSTE: (At the time of training, Sally Powers) Sally is no longer seeing her student. They saw each other for approximately 60 hours, but Sally felt she was not particularly motivated.

Sally would like to be rematched and has found her own student. She plans to follow through as soon as he is ready. She felt good about employer's cooperation. She does wish there were someone who could accommodate changes in tutor-learner matches when things don't work out. She has spoken to some learners who were uncomfortable with their tutors, so they simply dropped out rather than complain.

Sally felt she was well trained. Questioning ended as she was no longer seeing a student.

This concludes the interviews for February 4; it was evident at the end of the day that 1) project needs on-site coordinator 2) need special workshops (one or two hours long) assisting tutors with ideas as to how to work with more advanced learners.

The third interim report for the evaluation project of STEP AHEAD.

Rena Paradis *Rena Paradis*
NMCL

cc: Susie Sonflieth
Sylvia Sandoval

encls: 4 evaluations

February 13, 1994

REPORT FOR PERIOD FEB. 10 - FEB. 14, 1994
PROJECT STEP AHEAD

A total of six tutor interviews and five learner interviews were conducted. Three interview telephone calls were made the evening of the 10th, one of which was fruitful, one, a disconnected number and one tutor who returned the call at 8:00 the following morning. One tutor was unable to come to our interview due to the birth of her baby, and two male learners did not appear for their appointments.

As a summary of content, the following information was entered on the attached questionnaires. Because one individual asked that responses be anonymous, there will be no reference made to the names of individuals in this report.

None of the six tutors interviewed at this time were presently seeing their students. Two made a point of mentioning that they still see their learners and occasionally have conversations. Three tutors indicated that they would like to be rematched. All tutors felt they were well trained. All tutors felt the experience was valuable. Comments: gained self confidence...felt good...enjoyed it...liked being able to get a concept across...gratifying to see a good product...nice to have the ability to have impact, have a friend and confidant...fulfilling with a learner who is eager and willing...increased awareness of literacy problems...excellent experience.

All tutors served a learner for a generous amount of time. The average time one tutor spends with a student in most literacy programs can be from 3 months to a year. Most literacy programs hope for a minimum of 50 hours volunteer time from a tutor in order to feel the investment of training, follow-up and record keeping are well spent. Step Ahead tutors in these interviews indicated the following time commitment: 9 or 10 months; 20 hours; 60 hours; 30 or 40 hours; worked about a year, about 60 hours.

The following responses were given with reference to suggestions for a better employee-to-employee literacy program:

It should be totally volunteer with no employer participation in paying learners for time so that learners have a larger time investment.

There should be more flexibility on the part of the employer; less rigidity as to schedules.

There should be "an up-front work system in place," whereby someone could fill in for learners while they are at their tutoring sessions. Employees have specific work that takes

specific amount of time; they still have the same amount of work to do even though they are being paid for time with tutor. Supervisors become concerned; learners are stressed.

Give tutors a beginning and an ending date. Tutors want to make a commitment for a specific amount of time and then know that the project is finished.

Statements made "off" the questionnaire:

Tutor could^{not} find enough resource material for student.

Tutors and students need a neutral liaison between management, tutors and learners.

Learners have high hopes. They are given the impression that if they improve their skills, they will move up. Management would send learners to sessions or classes implying that it was a requirement, and then tell the learners that they would lose two days off a vacation. No promotions.

The department didn't make it easy.

Learners interviewed were, on the whole, happy about the help they received. One indicated that she was still seeing her tutor. One learner stated that she had never been matched. Those who had been matched indicated that they had made big strides in their skills and either wanted to attend TVI or were presently attending. Three learners would like to be rematched.

The following responses were given as to suggestions for employee-to-employee tutoring:

Depending on the hours learner works, they can be too tired to learn at the end of the day.

Learners who are interested in GED should be given the GED pre-test before they are assigned a tutor, so that they and the tutor know what the learner needs.

Would like more tutoring; perhaps an additional tutor for specific need.

Some tutors have transferred to Pine Tree. I anticipate interviewing there on the 18th with more learner interviews on the 17th at Pres.

This concludes the fourth interim report for the Step Ahead Evaluation Project.

Rena Paradis *Rena Paradis*
NMCL

cc: Susie Sonflieth
Sylvia Sandoval

February 23, 1994

REPORT FOR PERIOD FEB. 15 - FEB. 23, 1994
PROJECT STEP AHEAD

A total of one learner interview and eight tutor interviews were conducted. Three interviews were conducted at Pres. and the other five were at Pine Tree, where a number of tutors had been transferred.

The learner, an ESL student, stated she was still seeing her tutor and they are meeting twice a week; she could not guess for how many hours. While she hesitated to use English, she felt her English had improved considerably. We spoke Spanish for the most part and her improvement seemed to be in the area of listening comprehension as opposed to speaking ability. I would ask her a question in English and she could answer it in Spanish having correctly understood what I was asking. Her goal was originally to understand orders given to her and she has met that goal. It won't be long before she begins to speak English, but her confidence is still a little shaky. She indicated that her job was much easier now that she can understand what people say.

She stated that she has all the support she needs from her tutor and that everything is fine except that she has too much work and it is hard to learn when she is tired. She stated that English has been difficult for her because there are so many words and concepts-abstractions in the language.

She had no advice for any of us.

For the first time, I have received negative comments regarding the training from this group of tutors. Apparently the usual trainer trained with another person. In any event, I'll list the comments regarding training (I have asked the question whether tutors are tutoring or not, as NMCL is interested in the perspectives on the training all participants received).

Four tutors felt they received a good training but voiced the same concerns about lack of follow-up and wished there were inservices to address special needs.

Two tutors were emphatic about how angry they were with their training; one of the trainers was cavalier and "flippant." Another tutor referred to the the trainer as having a "disorganized, strange teaching style," and stated she "didn't have a clue what to do" when it was over. Both tutors were quite emotional about the training.

One tutor had been assigned three different students. One only came to two sessions and disappeared. The second and third came at the same time and then gradually shifted so that they came at different times. On the whole, the tutor guessed that the last two worked with her for five months. One tutor indicated that she had seen her learner for a year and five months; she thought the student may have really been an ESL student, not reading. The learner did make good progress however.

Another tutor stated that she has worked and is still working with her learner. They've been together for a year and four months. She stated that she faithfully turned her hours into ALP up until the last three months. She said that no one called her over the entire time period, and she felt that if they didn't care, she wouldn't bother. Apparently no one has called and asked why she is no longer reporting her time.

A tutor said that she only met with her learner three times. The student didn't seem very interested. Another tutor stated that she never met with her learner and was never reassigned. The next tutor said that she worked with a small group for five months once a week. She team-tutored with another, and thoroughly enjoyed it. Would like the same arrangement again.

The last tutor interviewed stated that while she hasn't seen her student since September, they are still in touch and plan to resume their work. She estimated that she saw her tutee approximately 65 hours.

Of the six tutors who stated they were not seeing a student at the present time, four would like to be rematched at some point. The other two were simply unable to manage the time commitment.

When asked as to gains in their own learning, the tutors made the following statements:

Tutor became aware of a "7th sense," which seems to kick in with non-readers. She learned of all the coping skills her tutee had used through life in order to get by.

Tutor learned more about English grammar due to the fact that she has had to "brush up," in order to help her student who is now attending T.V.I.

The tutor who was never reassigned after losing first student felt no gains in her own experience.

There were no other comments as to gains because the information was either not volunteered or the question was not asked due to the response on the first question.

When asked about special accomplishments of their learners, the tutors responded as follows:

Student now has the confidence to attempt future job applications and wishes to get GED.

Student has actually achieved goal as a result of tutoring, and obtained GED. Student is preparing to take Health Science at T.V.I. Learner now reads the newspaper and seems to feel better; walks differently and shows self-confidence.

Student was able to obtain a driver's license and is considering opening a checking account. Tutor's second student was able to get the G.E.D.

When tutors were asked if they feel well supported and what type of additional support they would like, responses were as follows:

One tutor stated "yes and no." She would have liked to have taken her student on field trips to find resources. She felt that there should be a GED pre-test before learners are matched so that they both know what student will need. She also would have liked some additional work with goal setting for tutor and student. She stated that there might have been more opportunities for "brown-bag" lunches where they could take turns presenting and sharing ideas. It would have also helped tutors understand the different roles of participants in the project.

The next tutor indicated that there was no consistent follow-up and that ALP was not particularly responsive; not very helpful in finding materials. Would have liked to have a copy of the roster so that tutors could contact one another. She definitely would like to see more support meetings and someone to call about suggestions for materials.

Additional tutors did not respond to the questions, as they were part of the questionnaire dealing with tutors still seeing learners.

When asked if they gained anything from the tutoring experience, tutors stated:

It was rewarding to touch both the student and the student's family...sort of a "domino" effect because the children became interested in the GED.

Another tutor stated that she found she enjoys teaching adults and that she has achieved a friendship with her learner.

The next tutor stated that her learners were "nice people." She said she found assessment of skills and discovering learners' needs interesting. She also learned to organize herself.

Another tutor indicated that she particularly enjoyed watching the student learn.

A tutor stated that the training, itself, was helpful to her in her own job.

Finally, a tutor stated that she felt ownership of the skill and has a different perspective, in general.

The following advice was offered by tutors:

Step Ahead was "okay." There should have been more description of each organization involved in the project. PHS should support employees to a larger extent; they should commit from the "top, down." There was no advice to trainers, but tutor stated that NMCL should have had a higher profile and ALP should be more responsive and efficient in matching and follow-up process. Tutor suggested that there be tutor/student recognition of some kind.

A tutor stated that Step Ahead should do more advertising; more encouragement of tutors and students. She said that PHS should be more clear about pay. The tutor trainer should be a real tutor with a tutoring background. Tutor didn't know the role of NMCL and suggested that ALP be more responsive.

Tutors who were no longer tutoring were asked for suggestions in creating a successful employee-to-employee tutoring program:

One tutor stated that there was total management involvement. Everyone was enthusiastic. Those who team-tutored could share lesson plan responsibilities.

Another tutor stated that someone needs to facilitate the first meeting; tutors can't waste time. Some tutors and learners simply can't leave their posts for two hours.

A tutor indicated that the matching was good, but there needs to be more detailed screening. They need goals. Training is too simple for working with advanced students.

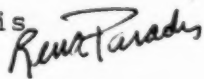
One tutor was concerned about the lack of confidentiality. She felt, however, that the matching was good.

Another tutor said that there needs to be more support from management. She also felt the training should be better structured.

A tutor suggested that some of the line workers could actually be tutoring, instead of having top-heavy matches with tutors in higher positions all of the time. She felt that training only management might be intimidating to some of the learners. Tutor stated that the down-sizing has left no time for anyone; they need real commitment from management.

This concludes the fifth interim report for the Project Step Ahead evaluation process.

Rena Paradis
NMCL



cc: Susie Sonflieth
Sylvia Sandoval

March 6, 1994

REPORT FOR PERIOD FEB. 24 - MARCH 6, 1994
PROJECT STEP AHEAD

This report will include two trips to Albuquerque. The first, Feb. 24 & 25, produced four interviews with learners: two were with materials management at the warehouse and two were in housekeeping at the Anna Kaseman facility.

One of the four learners is still seeing a tutor twice a week. She has seen her tutors for 16 months, working with ESL as well as reading and math. Her goal was to receive her G.E.D. and enter classes so that she could pursue a career in phlebotomy (sic). She stated that management was very helpful and that she was allowed to study at work as well as see her tutor. She stated that management was very "understanding and cooperative." She ultimately received her G.E.D. and is taking classes which include math and reading, both skills having improved enough to merit straight A's.

When asked how she would advise Step Ahead, PHS and ALP, she stated that she had no advice for the first two and would suggest that ALP match more quickly when students are dropped by learners (it's important to note that some programs around the country have as much as a six-month waiting period for learner matching).

When asked if there was anything else she would like to say to us, she simply said "thank you."

The next learner stated that he had seen his tutor twice a month for seven months. He wanted his G.E.D. and achieved it. He indicated that his tutor got too busy but promised to come back. So far he is without a tutor. Didn't express a desire to be reassigned. He would, however, like to be involved in a small group tutoring situation.

The third student was an exceptionally pleasant young man who is not seeing a tutor and claims he doesn't have time due to commitments to his child. He did state that he studies with his son, and that they practice spelling together, as well as math. He liked one-to-one tutoring but feared his time was too limited. He laughed at himself when he stated that when his child is a little older, he'll get back to it, realizing that it was a tenuous behavior, usually resulting in not doing what you think you will do. He requested materials to help him and his son with their spelling.

The fourth learner said he no longer saw his tutor but that they worked together for six months and met for two hours every two weeks. He, too, felt his family needed him and that he didn't have the time to study. His tutor had the foresight to take him to T.V.I., ALP and the public library

so that he could do work on his own if he wanted to. In taking a pre-G.E.D. assessment, he was unable to pass the math. His tutor showed him videos, computers and tried to help him. He still has trouble with math. It seemed apparent that he will not pursue his goal unless backed into a corner.

After meeting with learners, Syliya and I went to her home and went through records and materials that she had brought from Pres relevant to tutors, matching and learners. We were able to find a 3/5/93-list of unmatched ESL Tutors, unmatched ESL students and unmatched BR tutors, supplied by ALP. We found a second such list dated 9/9/93.

The second trip to Albuquerque (March 3) was to interview another tutor at Pine Tree. He was, perhaps, the most affected by his tutoring experience due to the fact that his learner dropped out, and he felt that all his hard work and concern was tossed aside. He had obviously invested a great deal of time in lesson plans and thinking about how he could further help this student. When asked if he had suggestions for creating a successful employee-to-employee tutoring program, he stated that he felt the program was "over sold." He thought expectations were too high on the part of the learners and tutors. He felt that student motivations may not have been very good, and that better screening would have made a difference. He felt that he, as a tutor, had no real support and that when he lost his student, there was no one he could talk to about it. He stated he felt "abandoned" and that he had failed. He did feel he had received good training. He said the materials were helpfull with his own child.

This concludes the sixth interim report for the Project Step Ahead evaluation process.

Rena Paradis
NMCL

Rena Paradis

cc: Susie Sonflieth
Sylvia Sandoval

March 13, 1994

REPORT FOR PERIOD MARCH 8 - MARCH 13, 1994
PROJECT STEP AHEAD

The interview process is complete with a last attempt to interview a learner whose schedule was changed and who was unavailable until the weekend.

I used this trip to touch base with ALP, paying a social call wherein I learned that they had just lost their training/in-service room to a new group who will provide a teen project for the mayor. I contacted Sylvia, who generously offered to try to obtain a meeting room for their inservices at the hospital. I gave the information to a worker named Josh, who may follow up by calling Sylvia.

As a final closure to the process, Sylvia and I met and I provided her with a list of five students and five learners who were interested in being rematched, as well as two materials requests from learners. Sylvia will assess the needs of a student who requested spelling materials using a test with tutor instructions from NMCL so that I can forward something to her for his use. The other learner has requested materials for algebra and I will try to find something to send to Sylvia for him. Sylvia will be responsible for the materials, as the learners do not have tutors.

Of 38 trained tutors from Pres, I have interviewed 19. Of 33 learners, I have interviewed 10, one of whom was never matched.

In visiting with Tony, my contact at ALP, pursuit of the Loveless tutors and learners seems impossible at this point as ALP has had a turn-over of Vistas and staff and files appear to be lost as a result of a move.

In concluding this last report I would like to suggest that Step Ahead reinstate modest support services to the tutors and learners who are inactive but may reunite and those who are still working together. As a minimal effort for existing tutors, I suggest that a few brown-bag inservices be initiated for problem solving and to address special needs. I also suggest that if there is something left in the budget for materials, that some basic literacy skills books be placed in the hospital library for tutor/student use. I would not recommend additional tutor trainings until tracking and support services are in place. I would strongly recommend a Pre-GED workshop be provided soon.

It has been my observation that few, if any, of the learners who were provided tutors were actually low-literacy students. Those learners who are illiterate or functioning at a very low level will come to the program, but it will take time and trust. Leaving this project with no support for those few still in the program will discourage potential new learners as well as tutors.

This concludes the seventh and final report in the evaluation process for Project Step Ahead.

Rena Paradis
NMCL

cc: Susie Sonflieth
Sylvia Sandoval

Attachments: List of evaluation participants
Summary-Tutor and Learner Evaluations (7 pgs.)

**A First Look Inside a Workplace Literacy Program :
A Participant-Observor's View**

Diane Pinkey
STEP AHEAD
June 1, 1994

Introduction

The STEP AHEAD project outlined a mission to improve communication in health care settings. Project staff assumed some basic ideas about communication and literacy as a starting point for developing the project in the hospitals that signed on as partners in this endeavor. These assumptions included that the hospital staff and administration saw a need to improve communication within the workplace. We assumed a willingness and commitment from hospital administration and staff to provide education to meet the goal of improved communication. We also believed that certain workers within the hospital were underserved by educational opportunities. This led to the development of a program goal to better serve these workers in the program. These underserved workers were identified as employees in entry level jobs or low qualifying positions in departments of housekeeping, food services, maintenance, and clerical.

We tested some of these assumptions for verification in discussion, observation, and program support within the hospital. Hospital personnel involved with STEP AHEAD agreed with a number of these beliefs and project goals. Additionally, STEP AHEAD developed course materials for short courses and literacy tutoring guided by some of these underlying assumptions.

As the program developed, we learned that some of our assumptions proved naive and even incorrect in what we were beginning to learn about workers' literacy and communication and the various work and management cultures in the hospital. For one thing, we learned that schooled credentials of high school diplomas or post secondary education didn't necessarily guarantee strong literacy skills or good communication or that lack of schooling somehow presumed that a learner couldn't exercise excellent communication skills. We even learned that improved literacy and communication skills were not necessarily a guarantee of job advancement within the hospital despite verbal support for that goal.

As we looked more closely at how people in the hospital communicated, at what people felt and believed about communication and literacy, and at who attended classes and how and why they did, we made changes in our thinking and in our program. The strength of using reflection and analysis in the development of the project led us to consider a need to foster a "culture of literacy" in the hospital. With this goal in mind, we challenged a more difficult task. This task, to our thinking, offered a greater opportunity for providing a successful and enduring program in the hospitals.

Teacher-Researcher Role and Methodology

From August 1992 until the present, I have been teaching short courses through the STEP AHEAD Program of NMSU at Presbyterian Hospital and Lovelace Health Center. Besides teaching, I have also been researching the program development of STEP AHEAD and classroom action using qualitative inquiry in general and ethnography in particular. Ethnographic field methods include, for example: participant observation, interviewing, analysis of material culture, and teacher and student journals. Besides collecting information about the action, interactions, and relationships that occur in the program, ethnographic inquiry also includes a "sociocultural interpretation of the data" (Merriam, 1988, p.23). This research methodology is an ongoing and recursive process for informing teaching, improving program access, and educating all program participants.

The double roles of teacher and researcher, of participant and observer, present the potential for conflict as they may at any time betray each other. Yet attempting to hold steady the balance between objectivity and subjectivity requires great concentration and commitment to the ethical implications of the task. I acknowledge my biases and will account for them as they surface. I embrace complement over conflict in my dual roles as I work to maintain a neutral distance and a close relationship. The contradiction inherent in this teacher researcher position is the grease that keeps the research machine operating to generate a view from the inside and outside of this workplace literacy program.

One additional approach informs my understanding of my role as researcher and teacher. The idea of "action research" frames a respect of what we learn from the emerging patterns of knowledge, learning, literacy, and communication and make changes in the classroom and the program that are relevant and meaningful to ALL project participants.

In the hospitals where the STEP AHEAD workplace literacy program takes shape, these methods guide data collection and analysis in the sites of classrooms, meetings, conferences, work areas within the hospital, and the world at large as they directly and indirectly present a view of workplace literacy, workers' education, the quality of work life, health care reform, and organizational re-structuring.

As noted above, I employ a number of field methods to document the action within each site and in each scene. They include the following:

1) Participant Observation (P/O)

The dual roles of participant and observer and teacher and researcher provide a way to document, evaluate, and initiate program change based on a "teacher research" model (Goswami 1987; Nihlen 1991) and an action research model (Argyris et al 1985). This model is guided by certain assumptions that allow prescription for change to intervene as the project proceeds. It is also necessary for me to acknowledge that I position myself in the world of the project and contribute my knowledge and world view as a participant.

Participant observation can occur in a number of ways. It can document activity and interaction by using timed intervals, e.g. recording the classroom action for 5 minutes with a ten minute break in between, or it can be theme-based whereby each time a construct of gender or status emerges in interaction, the researcher documents what is said, who says it, and describes the context. This information is then used to evaluate what this might mean for education. The value of participant-observation is its contribution to the development of a rich data base as one of a number of field methods.

2) Qualitative Interviewing

Qualitative interviewing is a formal or informal method of documenting conversations, discussions, and sharing of "insider" knowledge to better gather what participants in the project understand about what is happening in their cultural scene: a classroom, the hospital, or their work area. In the STEP AHEAD project, I used qualitative interviewing in taped interviews and field note documentation to gather information, feelings, and opinions on education and communication at work. This documentation is a face-to-face method of data collection that occurs a number of times in a continual process to foster critical reflection and praxis. The need for a trusting relationship with the researcher to obtain useful data is presumed in this process (Smith-Burke 1987).

3) Analysis of Material Culture

This method of data collection includes a gathering of documents that relate directly and indirectly to the project and participants. These documents include course materials, correspondence, promotional information and activities, news articles, the grant proposal, project reports, course evaluations. This data source is used in conjunction with the sources of data outlined above for comparison and triangulation of research documentation. The goal is to create as rich a data base as possible to minimize the limitations of this research method.

4) Research Assumptions

The assumptions that guide this research and teaching methodology include consideration of four key questions. The are as follows:

- 1) What is the place of theory in relationship to the data?
 - 2) What is the position of the evidence, and to what extent can it be generalized?
 - 3) Where do the units of analysis come from?
 - 4) What point of view is used to structure the analysis?
- (LeCompte, Milroy, and Preissle 1993)

By answering these questions, I choose a qualitative view where I position myself within the project. I also choose induction as a way to respect and understand the local or insider knowledge of the project participants. I view the case study as a contribution to other research on workplace literacy programs. Putting this methodology to work has helped me to better understand what is going on in the STEP AHEAD project. It has also improved my teaching.

Instead of formulating a theory at the onset of the project or class like, e.g. people are going to learn a designated content and they will learn it in a certain way, this method allows beliefs, knowledge and thinking to emerge based on the world view of the participants. The idea is to look for patterns in this data to shape our understanding of what is going on. We must be open to change and make changes.

Practical applications of this method inform education. For example, we might decide to use a learning activity that provides a sample scenario that assumes a tough choice for a supervisor. After discussion with the class, we might learn that the scenario is hardly tough compared to another situation that is more challenging, realistic, and pertinent to the world of supervising in that hospital. We have a choice at this point. When we discover there's only 20 minutes left to class and we haven't covered the course content for the day, we might favor completing our outlined lesson plan in exchange for a valuable learning opportunity that puts the course content to work.

As another example, we might discover that the people who we think should come to class (our targeted population) aren't attending. We can make all kinds of generalizations from this reality that might have nothing to do with the disappointing turnout. Again, we have a choice. If we hand out a questionnaire to workers who have low literacy skills, we might not get at what's causing the problem. If we rely on supervisors to tell us what is happening, we may accept answers that hide a hidden agenda of insuring that the work gets done regardless of a participant's desire to attend a

class. If we ask straight out in face to face conversation, we may get an answer that the respondent hopes pleases us but masks true intentions and reasons. To get at what's really going on takes research methods that include participant observation, interviewing, and analysis of the culture. The process takes time, but it allows that all participants in the project get the opportunity to identify literacy problems and seek educational solutions that make sense in their workplace. It lends support to a greater chance of buying into a change in culture, to consider a culture of literacy.

A First Look: Guiding Questions

Eight questions steered my inquiry in the worlds of STEP AHEAD and the hospitals. They were as follows:

- 1) How do people communicate?
- 2) What do people have to say about communication and literacy?
- 3) What do people believe and feel about communication and literacy?
- 4) Who gets education and how that is done in the hospital?
- 5) How did STEP AHEAD happen?
- 6) How did STEP AHEAD classes inform an understanding and use of communication and literacy in the workplace?
- 7) How did the STEP AHEAD partnership work?
- 8) What did each of the partners know, and what did they learn?

Observations and Analysis: A First Look

Teaching and researching the STEP AHEAD workplace literacy program encouraged and uncovered many successes for the program participants. Tutoring led to completion of GED in some instances. The project also provided some participants with the support and skills development that they needed to consider job advancement within their departments or into other departments. Course participants shared that their consciousness about communication overall was raised. For some workers, the classes sparked a renewed interest in adult education.

Five critical categories emerged as frames for a number of issues made visible in the first review of the data from field notes of classroom observation both in my classroom and in 3 other classrooms, in the hospital in general and work areas in particular. The data comes from one year of participant observation in the hospital. These categories highlight various conflicts, contradictions, and concerns for providing literacy and education at work and include: literacy uses on the job, communication challenges in a hospital, providing education at work, restructuring in the

workplace, and linking improved literacy skills to personal and professional growth. No category stands separately but, instead, weaves with all others to create a complex and dynamic fabric of a workplace literacy program.

Literacy Uses On-the-Job

Just how and why people exercised reading and writing on-the-job varied from work area to work area. The variation exists for a number of reasons, e.g. a need or interest for using literacy and communication skills, specific job requirements, hierarchical control of these tasks, attitudes about work and the relationship of these skills to the overall job task, expectations and also, distrust for the benefits of improved skills. Many jobs don't require much reading and writing. Often jobs have been "literacy proofed" to downplay reliance on those skills and minimize errors in a job. The use of checklists, supervisor-read communications, oral instructions, and group or shared literacy activity was present in many of the jobs.

In interviews discussing the literacy requirement of their job, a group of medical records clerks at Lovelace initially described minimal reading and writing requirements to do their jobs. One clerk, Rita, said that reading was discouraged because of the confidentiality of the information being filed into charts. She noted, "If people read the paperwork, they'll never get their work done anyway" (Interview #1). Another clerk, Mandy, outlined the nature of the filing task as reading a number and matching it with a name. Her analysis of reading extended Rita's description since Mandy explained that a mistake can be made with "wrong numbers and wrong names". To check this problem, the clerk may have to read a dictation for consistency in the chart.

Besides job-required reading, the clerks described reading and writing demands resulting from the work in their self-directed team. These literacy requirements were new. A library in the department was made available for the team to access materials (books and videos) on team-building. According to one clerk, they took turns in the team meetings reading to the group from these materials. They also worked on creating an agenda at the end of each meeting. Clerks shared meeting responsibilities of charting the meeting and acting as meeting "reporter".

When asked the question, do you have to read in your job?", the medical records clerks initially said, "no" or "not much". By drawing out a description of their job tasks, I discovered that they had to read and write much more than they, at first glance, thought they did. The team building provided a necessary context for putting literacy skills to work at work.

By comparison, an initial analysis of literacy skills in Presbyterian's housekeeping department showed a different profile. A quick glimpse of the housekeeping department's communal space revealed a 3 shelf bookcase stacked with forms 6 piles across each shelf. These forms were checklists for quality control, work completion, and other housekeeping-related issues. Most of them were not currently in use. According to several housekeepers, only one form was used to check off completion of a clean room as part of the nightly requirement on an assigned floor or hospital wing.

When I talked to housekeepers about what they needed to read and write, like the Lovelace clerks, they answered that it was minimal. If a memo was posted, someone would read it and would share what it said. Usually, memos were read by supervisors in the work area meetings. When doing a workshop on active listening with the majority of the department, I noticed that the workshop hand-out was, overall, not used or referred to in the meeting. Several people asked what they should do it with it when the meeting was over.

Although team building was being encouraged and developed at Presbyterian, it had not reached into the housekeeping department except at the supervisory level. Meetings were typical hierarchically-controlled events with supervisor or department head initiating and directing the agenda. With the exception of the supervisors, the work group did little reading and no writing in the meetings.

Housekeepers usually shared literacy tasks amongst each other; the tasks included both Spanish and English translations. Housekeeping is the one department where I heard Spanish spoken the most often in work areas in the hospitals.

Communication in a Hospital

Within a number of work areas, communication was controlled in ways that supported a traditional division of labor of the communication tasks. In some departments, supervisors, department heads, and workers had set written tasks. For example, only certain people could write a memo. Structuring written communication through a chain of command supports the difficulty for lower ranking workers to contribute ideas in writing. Additionally, the control over information in general concerned many workers. They often expressed feelings that they didn't know what was going on; they also didn't know how to find out. One other example of control was expressed a number of times with regard to supervisors using a heavy-handed editing of written documents that actually resulted in changing the meaning and intention of the writer.

Many of the workers described a need for improved communication in all directions. While they might be the one member from a work area who wanted to improve communication, they worried that the rest of the work area was oblivious to that goal. Many times, participants raised the issue that their supervisor or the doctors (higher ranked workers in the hospital) needed to take classes to improve their communication as well. It was also clear that a number of participants found the courses useful for coping with very difficult communication problems in their work areas. This cast the course into the role of a crisis intervention.

In discussion on communication at work, participants noted the number and variety of their communication encounters. A number of surprises on this account lead participants to see and acknowledge greater challenges for some workers over others. e.g. housekeepers must communicate with everybody in a hospital, that is, from patient up through the ranks to doctors. Medical Records clerks only need to communicate with staff within their departments.

The Straight Talk courses and continued discussion outside classes brought out the participants knowledge of the links between improved communication and good morale, getting the job done, the effectiveness of teamwork when it was happening, a reduction in job stress, and making life at work easier. It was a pleasant surprise to hear of the need and see the success of the oral communication classes. Participants genuinely enjoyed the classes. Many commented on the important connection to the reality that face-to-face was the most effective way to communicate in the hospital.

At times, communication was problematic between the various partners in the literacy enterprise. The projects in the major sites of Lovelace and Presbyterian developed very differently. Good communication within the worksite as well as with the partners was critical to the success of the project. Lovelace took responsibility for their part in abrogating the task of communicating information on the STEP AHEAD project within the hospital. Key personnel cited the organization's shifting priority to their "quality" initiative as an issue. The challenges of communicating within Presbyterian were met more effectively by greater leadership of key hospital personnel. An additional communication problem developed when our literacy education provider suffered programmatic upheaval midway through the project when they lost their director. That communication link weakened with both hospitals as a result of that change.

Education at Work

Education happens continually in the hospitals. There are many different educational fares, and some are restricted. Hospitals offer their doctors courses to stay current in their fields; nurses and some technicians maintain their licenses by taking continuing education classes; staff from both Presbyterian and Lovelace can choose from a number of TQM courses as well as some health occupational, customer service, and computer courses. A tuition reimbursement program exists to support staff in work-related programs at local educational and vocational institutions.

Some health care workers have greater access to educational opportunities at the hospital than do others. The hospital offers the lion's share of education to middle and upper level management despite good intentions to flatten the hierarchy and improve workplace democracy. As is often the case in the workplace, front line workers and entry level confront a host of barriers to education and training provided by and through the hospital. The STEP AHEAD program has been concerned about this fact since we identified these workers as our target participant population for the program.

The 50-50 release time deal negotiated for the STEP AHEAD classes discouraged some participants. A teacher-trainee who hoped to teach the Straight Talk class shared feedback from her co-workers that many of the women were unwilling to give up their PTO time which they saved to care for a sick child should the need arise. Some workers also questioned 100% release time for the quality classes compared to 50% for the STEP AHEAD classes. To a number of workers, this organizational decision qualified support for the STEP AHEAD program.

Class participation proved troublesome for workers for a number of other reasons. Good intentions to allow all staff to participate in the course did not always result in providing a way for that to happen. For example, flyers or newsletters get distributed throughout the organization inviting all workers to participate in STEP AHEAD communication classes. Sometimes supervisors shared the information, and sometimes they didn't.

Workers expressed a number of additional participation barriers to education. Many front line workers shared that they didn't even consider going to class on-the-clock since there was no one to take their place on the tray line in the kitchen or on the floor cleaning their assigned rooms. Everyone talked of the burden of time constraints which resulted in a competition of choices with mandatory in-service training and quality and customer service courses. Several participants were angered by force participation in classes as a sanction for troublesome behavior in their work

area. Many participants who infrequently participated in education at work shared their fears of "schooled notions" of education, e.g. being called on in class, being forced to participate in the class, not knowing enough about what was being taught, an inability to express themselves, and displaying appropriate classroom and group behavior. A new supervisor talked about sitting in a STEP AHEAD class and rehearsing in his head during the entire class what he would say should he get called upon to speak.

The commitment to provide education through the STEP AHEAD program was different in the two major sites of Presbyterian and Lovelace. Each partners' commitment changed throughout the time that the program moved from agreement to development to follow-through and evaluation. At Lovelace, the change to less support by the organization influenced the STEP AHEAD project significantly. The literacy provider had a harder time coordinating the program on-site. Their use of VISTA volunteers to run the program was troublesome as well since there was a lot of turn-over in key personnel.

The STEP AHEAD technical support of the Lovelace project at the site also weakened. Roles were at times unclear. Sometimes the work just didn't get done, and we didn't find out about problems until they were big problems. We lost good tutors, team teacher trainees, and supervisor support because of the lack of follow-up.

Restructuring at Lovelace lead to privatization of our targeted departments (housekeeping, food services, and maintenance) to the Marriott Corporation. This resulted in a weakening of organizational concern for providing education for these workers. Marriott's priorities focused on their organizational agenda as they transitioned into the Lovelace worksite.

Both Presbyterian and Lovelace became sites where a competition for learners with other organizational education took place. As mentioned above, many workers expressed the inability to participate in all of the different educational fares. The team building work areas were under particular stress with commitments to re-education and numerous meetings. New customer services training was mandatory in some work areas as well. Restructuring at both Presbyterian and Lovelace created added stress in many work areas where staff was short. This, in turn, created participation barriers to education at work in general and STEP AHEAD in particular. Some workers felt that they might take class later "when things settle down" (food services) or "when they got more staff "who stayed" (housekeeping).

Restructuring in the Health Care Industry

Restructuring in the hospitals directly and indirectly influenced the working of the workplace literacy project. I have already cited a number of examples above. Despite strong initial support for STEP AHEAD, Lovelace withdrew organizational support at the critical time when STEP AHEAD needed to get going. Lovelace shifted support to its organizational agenda of quality. In March 1993, privatizing departments identified as STEP AHEAD priorities also affected program development at this site. Belt-tightening in the restructuring of the organization also added stress and extra work to the work lives of many hospital staff. A nursing supervisor of 60 people, Mark, described his conflicts with communication and work as follows:

My frustration is I have a lot of work to do and [I'm] not able to complete it. I am expected to spend a lot of time with my staff in interaction with training and work assignments, reviewing work. The responsibilities I have are terrific. I have gone to my manager to express my concern at not being able to complete my work and how frustrating it is for me to have so many things partially done and not having the time to be able to give them my full attention (Communication for Supervisor Class).

Mark never did finish class; he cited conflicts with other classes plus an increased work load as the reasons.

As is often the case with competitors in health care in a large city, when downsizing action occurred in one site, we could usually bank on action in the other. So it was with the quality initiative as well as belt tightening in both Lovelace and Presbyterian. A big push on quality management (Operations Improvement) occurred from the onset of STEP AHEAD in Presbyterian. This may have affected project support. A downsizing move that began in October 1993 at Presbyterian slowed STEP AHEAD program efforts in that site. Restructuring through early retirements, voluntary separations and lay-off added strain in a number of departments as work groups shrank and work loads increased. As expected, STEP AHEAD class attendance foundered at this time.

STEP AHEAD saw a link between the literacy and communication program to the quality initiatives from the onset of the project. We didn't always have the power to make that link or affect organizational decisions to foster the link.

Seeing Improved Literacy and Communication as a Benefit

One of the intentions of workplace literacy programs, including STEP AHEAD, was to provide workers with an opportunity to benefit from improved communication, both personally and professionally. In course materials and classroom action, the personal benefit was addressed to show that improved communication makes life at work easier and fosters adult development in interpersonal growth. Many participants did indeed benefit personally. A supervisor shared that when she learned to write a memo better, she also learned that she could do a better job of editing the writing of her employees in their work area. Just being able to cope better with difficult people was often cited as the most significant gain from the oral communication course. Improved study skills prepared people to take tests with new ways to deal with stress, time-restrictions, and reading technical and test texts.

Medical records clerks described powerful changes in the way they dealt with difficult communication situations noting their behavior changes from being "blunt, critical, and hateful" to using "empathy, thinking about people's feelings, and listening".

The professional benefit of improved communication promised a connection between improved literacy and communication skills and advancing within the organization to a better job. We felt that hospital workers needed to improve their literacy skills in order to get ahead in their workplace. I believe that there is a link, but it's also important to be aware of other information that emerged on the reality of job advancement in the development of the project. A number of workers maintained that they do not need to read and write to do their jobs; they could figure out ways to get around it. As for moving to a job that might require improved literacy skills, some workers insisted on a mistrust of skills improvement alone when the politics of advancement held such a powerful sway in the hospital. Holding out a promise that a "better" job would require greater workplace literacies did not always make sense or seem real to many workers.

A number of workers expressed hopelessness and negativity to a buy-in to the success of organizational change when the existing power structure maintained double standards. Often cited was the bad communication of doctors that workers were told to accept since they were required to "do everything for the doctors". Workers sometimes wondered "why should I improve my communication when nobody else will?"

Both status and culture clash influenced understandings of how education might be a benefit. Status issues of blue versus white collar worker communication were often raised in classes. A seemingly simple concern to have a greeting returned was critical to many. In every class that I taught in, I heard a mention of this communication breakdown across ranks and work areas. Within the housekeeping department, some pressure to maintain status existed. This came out in discussions of local culture within the department where some housekeepers saw advancement as "brown-nosing" and thinking of oneself as better than the others. Fear of failure in front of peers as well as in the presence of hospital staff from other work areas sometimes made it easier to not even attempt participation at all.

A 52 year old GED student, Maria, very much wanted her GED diploma because she identified a need to move up to lead housekeeper and eventually, supervisor. She was inspired to advance by worry about her age and her health and just how long she would be able to keep making beds. Maria had taken 5 GED tests a year ago and passed two. Imagining herself participating in the local community college's graduation, Maria decided to try and pass the 3 GED tests she needed for completion of her equivalency diploma. With only 8 weeks left before graduation, she prepared for Math, Writing, and the Arts and Literature tests. It wasn't enough time, but she wanted to prove something to herself.

Maria had also decided that she would serve as a role model for her co-workers. She felt that if she could do it, so could they. Maria took on a great deal of responsibility for herself and others in her work area. As it turned out, she didn't pass all the tests to make her graduation deadline. Her greatest disappointment was not missing graduation; it was letting her co-workers down and failing to show her supervisor that she could succeed.

One other pattern emerged and it surprised me. Sometimes workers asked, "why can't we just stay in our jobs?" since they felt that doing a good job in their job was enough. These workers expressed that the value of their jobs in the successful operation of the organization could be recognized by better pay instead of a job advancement. The lower paid workers felt that a "real" payoff for education needed to show up in their paychecks.

Necessary Changes

As is often the case, evaluation done at the end of any project yields all kind of prescriptions for improving the finished project. I have a few ideas to share which are based on what I've learned about doing workplace literacy projects in hospitals.

My use of action research that included evaluation as an on-going and additive process met with some success, in some cases. My goal was to make the project successful by making changes as the project developed instead of waiting until the end to measure success or failure. One example of this action resulted from our concern that housekeepers were not coming to classes. Had we waited for housekeepers to sign-up for short courses, we might never have achieved that goal. It was necessary to create an opportunity for attendance since housekeepers expressed many problems with taking advantage of education at work. Using the "in-service" structure that already existed in the department for training, we offered an introduction to Straight Talk as a way to de-mystify the class.

On the other hand, we had also hoped to do follow-up courses (reunion classes) as a second part to the oral communication short course. We talked about using this follow-up class as both a refresher and a way to evaluate the effectiveness of previous instruction. Except in the case of two classes, we just didn't have the time to do this for all participants.

Literacy

Understanding the uses and meanings of literacy at work is problematic and challenging. It was not always clear that hospital staff were aware of the needs and uses of literacy and communication at work. Many contradictions emerged in interviews and discussions on these topics. I believe that we need to do a better job of bringing all staff into the discussion so that shared meanings can evolve as part of the understanding. This can be a learning process where conflicts get addressed and consensus developed. It seems that a buy-in to change will only occur if we construct focus groups that represent all work areas, and especially those work areas we have targeted as priority areas for improved literacy and communication. We can't rely on second-hand descriptions and prescriptions, i.e. allowing just the supervisor or the manager to tell us what is going on or needs to go on with literacy and communication in the workplace.

Communication

Organizational support to improve communication at work needs to be a unitary and unifying goal. It won't work to say that only some people need to improve their communication while others don't. Everyone needs to improve their communication skills at work. Advanced degrees in education offer no assurance of good communication; lack of education, in turn, cannot presume poor communication skills. A more

collaborative view of improving communication throughout the hospital fosters a learning environment where the hierarchy flattens and peer learning opportunities develop. Learners and teachers share in identifying needs, methodological concerns, curriculum and materials development, and evaluation in a continual process. Real and meaningful communication tasks are embedded in these educational considerations.

Education at Work

The most important workplace education goes on in the process of understanding where the organization stands on education and who will get it in that workplace. Improving literacy is not just about achieving competencies, it's also about using literacy skills to accomplish something, e.g. solve a problem, or conceive and communicate an idea, or contribute to making an event happen. In the workplace, we have to be careful not to replicate the agenda of the elementary and secondary schooling experience. The tendency of literacy programs to be secretive as a way to protect participants or use leveling and tracking can backfire into reinforcing shame and deficit-models of knowledge as well as resistance to those same schooled notions of success and failure. When we hold literacy learners at a distance, when we separate them from us into their literacy program, we encourage learners to stay in their places. This can keep them away from education and worse, from the sites of learning in social contexts where skills get put to work.

Report after report cites the problem of attendance in literacy classes for entry level workers. At the workplace, education for lower level workers is often just training to do a job task. These facts combine to challenge an organization to decide what they will do about education for all staff in their workplace. Will it provide more money to bring in back-up staff? Will it offer more time for education that includes the dynamics of group process, shared decision-making, and leadership development?

If we view education as a possibility for all staff and as a learning opportunity that is equitable and fair, then, we might see a greater buy-in by participants. We might also see greater program success. Unless the workplace commits to education for all, it doesn't happen.

Restructuring

We all agreed that organizational support was critical. From the time a business signs on as a partner, through the time it takes to make a literacy or educational program part of the workplace agenda, many changes can occur. Project

staff need to spend a great deal of time in the workplace building relationships and promoting an environment that will support education for a long and sustained period. If that is not done, the worksite staff and administration find other things to do.

The business of health care will be under stress and transition for a number of years to come. Change will become the defining feature of the industry as reform takes shape. We can't wait until things settle down to do education; the upheaval actually creates a potent need for education in hospitals and other health care settings.

Making Benefits Real

Studying the reality of improved literacy skills leading to personal and professional gains for workers needs to occur over a longer period of time than the length of the project. What we discover in first evaluation interviews is often "feel good" responses to the educational experience. That's important because it can capture the attention of the adult learner and motivate them to continue involvement in education. To discover more critical personal and professional development takes time. There is certainly more than skill development involved in the process.

Based on understanding the complexity of the relationship between adult development and improved skills as well as the dynamics of workplace politics, literacy programs need to consider just how effectively they can insure that improved skills will lead to job advancement. If we hold out a promise of meeting this goal, we need to take better action to encourage success. The promise of a real connection needs major support from all partners (especially the workplace) in the literacy enterprise to make it a real benefit.

This is a first look at what I've learned about a workplace literacy program. Because I know there's more to learn, I look forward to my continued education.

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